2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006550

Entity Name: SEVEN BLESSING, INC.

FILED Feb 18, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1250 EAST HALLANDALE BEACH BLVD. #404 18851 NE 29TH AVENUE HALLANDALE BEACH, FL 33009

7TH FLOOR

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

18851 NE 29TH AVENUE 1250 EAST HALLANDALE BEACH BLVD. #404

HALLANDALE BEACH, FL 33009 7TH FLOOR

AVENTURA, FL 33180

FEI Number: 26-0503469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ADAR, AMRAM ADAR, AMRAM

18851 NE 29TH AVENUE 1250 EAST HALLANDALE BEACH BLVD. #404

HALLANDALE BEACH, FL 33009 7TH FLOOR AVENTURA, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: AMRAM ADAR 02/18/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

ADAR, AMRAM ADAR, AMRAM Name: Name:

Address: 1250 EAST HALLANDALE BEACH BLVD. #404 Address: 18851 NE 29TH AVENUE 7TH FLOOR

City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: AVENTURA, FL 33180

Title: Title: () Delete () Change () Addition

Name: COHEN, ELIOT Name: Address: 21140 NE 21ST PLACE Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip:

Title: () Delete Title: () Change () Addition

DAHAN, SHLOMO Name: Name: 19900 TURNBERRY VILLAGE Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMRAM ADAR Ρ 02/18/2008