## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000008983

SANTOS GUTIÉRREZ, MARIA

JACAREPAGUA, RJ BRAZIL, XX XX

ESTRADA CAMINHO DO LEOPOLDO 680 CASA 15

Name:

Address:

City-St-Zip:

FILED Feb 26, 2008 Secretary of State

Entity Nar	ne: SOUTH	KIDS INTERNATIOI	VAL, INC				
Current Principal Place of Business:				New Principal Place of Business:			
1735 CALA APT #6 MIAMI BEA	AIS DR ACH, FL 3314	1					
Current Mailing Address:				New Mailing Address:			
1735 CALA APT #6 MIAMI BEA	AIS DR ACH, FL 3314	1					
FEI Number:		FEI Number Applied For (X)		El Number Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered	l Agent:	Name and	Address	of New Registered Agent:	
The above	AIS DR ACH, FL 3314		ent for the purp	ose of changing it	s registere	ed office or registered agent, or both	,
SIGNATUR	RE:						
	Electro	nic Signature of Reg	jistered Agent			Date	
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANG	ES TO OFFICERS AND DIRECTO	RS:
Title: Name: Address: City-St-Zip:	P ( SILVEIRA, ELI 1735 CALAIS I MIAMI BEACH	DR, APT #6		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ROBLEDO, ME 2931 SW 1ST MIAMI, FL 331	AVE		Title: Name: Address: City-St-Zip:	350 85TH	(X) Change ( ) Addition , RICARDO STREET APT 19 ACH, FL 33154	
Title:	D (	) Delete		Title:	D	(X) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

BAGNASCO, REBECCA

MIAMI, FL 33180

1900 SANS SOUCI BLVD APT 402

SIGNATURE: ELIANE SILVEIRA Ρ 02/26/2008