


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 05, 2008 8:00 am
Secretary of State

08-05-2008 90003 036 ****73.00

DOCUMENT # N19015 1. Entity Name AHEPA 421, INC.	
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Principal Place of Business 350 N.E. 141ST ST. MIAMI, FL 33161	Mailing Address 350 N.E. 141ST ST. MIAMI, FL 33161
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DO NOT WRITE IN THIS SPACE



06262008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2842462	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DEMOS, ANGELO P. 100 N. BISCAYNE BLVD., S-801 MIAMI, FL 33132

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAGALIOS, ELIAS 4730 COMMUNITY DR WEST PALM BEACH, FL 33409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VALAVANIS, ANGELO 2608 NE 214ST AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAPSAS, JOHN N 5600 SW 109 FORT LAUDERDALE, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATHANASION, MICHAEL 11500 E. SQUIRE CT. INVERNESS, FL 34450
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EIGALOS, BOBBY 290 NW 125 ST MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAYO, JOHN A 1207 SW 87 TERR PLANTATION, FL 33324

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angelo C. Valavanis ANGELO C. VALAVANIS 7/16/08 305 33164139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #