2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 05, 2007 8:00 am Secretary of State 04-05-2007 90139 019 ***150.00

DOCUMENT # P00000035912 1. Entity Name CESAMA, INC.								40050934				
Principal Place of Business Mailing Address 520 BRICKELL KEY DRIVE SUITE 0-305 520 BRICKELL KEY DRIV MIAMI, FL 33131 MIAMI, FL 33131						VE SUITE 0-305				4 4-40 EVING MICH		TIRS A ITEI
2. Principal	Place of Busin	3. Mail	3. Mailing Address									
Suite, Apt	. #, etc.		Suite	Suite, Apt. #, etc.				03052007	Chg-P	CR2	E034 (12/06))
City & State			City	City & State				4. FEI Num 65-09	ber 96568		<u> </u>	pplied For lot Applicable
Zip	Country		Zip	Zip		Country			e of Status Desire		\$8.75 Ac Fee Requir	
	6. Name	and Address of Curre	nt Registere	7. Name an	d Address of Ne							
TRANSGLOBAL CORPORATE ADM., LLC. 520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131 Suff O-									per is Not Accept		teation	131
8. The above	named entity	submits this statement	t for the purpo	ose of changing its	registere	d office or r	egistere	ed agent, or b	oth, in the State of	Florida. I an	n familiar with	and accept
SIGNATURE.	Signature, typed	Also	Alk	re	2		03/1	<u>ulo-</u>	1			
FIL After Ma	E NOW!!! ay 1, 2007	FEE IS \$150.00 Fee will be \$550		. Election Campa Trust Fund Cont		cing		00 May Be d to Fees				
10.		OFFICERS AN	D DIRECTOR		11.	· · · · · · · · · · · · · · · · · · ·		ADDITIONS	/CHANGES TO C	FFICERS AN	D DIRECTOR	S IN 11
TITLE Name	D HERRERA	VALENCIA, BENHI	JR	☐ Delete TIT							Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	520 BRICK MIAMI, FL	JITE 0-305	E 0-305 STRE								ı	
TITLE NAME	AS ROJAS, M	ARCO		☐ Delete TF		· •					Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP		ELL KEY DRIVE #0	-305			T ADDRESS ST-ZIP						
TITLE NAME				☐ Delete			_				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP					NAME STREET CITY-S	T ADDRESS						
TITLE NAME STREET ADDRESS CITY-SI-ZIP		-		☐ Delete	TITLE NAME STREET	I ADDRESS ST-ZIP				,	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2IP				☐ Delete	TITLE NAME STREET	ADDRESS IT-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Dalete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP					☐ Change	Addition
Indicated (on this report of cration or the or on an attac	nformation supplied will or supplemental report receiver or Justee emp hment with en address.	is true and accovered to ex	curate and that me cute this report a like empowered.	v sionatu	re shall have	e the sar	ne legal effec	t as if made unde	c oath: that L	am an ollicer.	or director