


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # P0000038324


1. Entity Name
 EL LIBANO VO CORP.



Principal Place of Business
 9801 S.W. 5TH ST.
 MIAMI, FL 33174

Mailing Address
 9801 S.W. 5TH ST.
 MIAMI, FL 33174

DO NOT WRITE IN THIS SPACE



01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1009256	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRERA, ISAAC
 9801 S.W. 5TH ST.
 MIAMI, FL 33174

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UN00000874393
 04/10/08-80115-024 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VELEZ, GERMAN 9801 SW 5TH ST MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ORTEGA, SONIA 9801 SW 5TH ST MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HERRERA, OLGA L 9801 SW 5TH STREET MIAMI, FL 33174
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 607, 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: _____ *GERMAN E. VELEZ (D)* 03-19-08 305.226.2445

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #