

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 04, 2008  
Secretary of State**

DOCUMENT# P00000088908

Entity Name: PROJECTION ONE, INC

**Current Principal Place of Business:**

155 OCEAN LANE DR  
SUITE 312  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

155 OCEAN LANE DR  
SUITE 312  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

FEI Number: 65-1042430      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

RENDON, JAIME  
155 OCEAN LN DR APT 312  
KEY BISCAYNE, FL 33149 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: BOTERO, BEATRIZ  
Address: 155 OCEAN LANE DR APT 312  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: VDS ( ) Delete  
Name: RENDON, JAIME  
Address: 155 OCEAN LANE DR APT 312  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T ( ) Delete  
Name: BOTERO, BEATRIZ  
Address: 155 OCEAN LANE DR APT 312  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEATRIZ BOTERO

P/D

04/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date