

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096852

Entity Name: PROJECTLAND CORP.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

806 DOUGLAS RD
SUITE 850
CORAL GABLES, FL 33134

Current Mailing Address:

806 DOUGLAS RD
SUITE 850
CORAL GABLES, FL 33134

New Principal Place of Business:

520 BRICKELL KEY DR
SUITE 324C
MIAMI, FL 33134

New Mailing Address:

520 BRICKELL KEY DR
SUITE 324C
MIAMI, FL 33134

FEI Number: 65-1049940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT CORPORATE SERVICES, INC.
806 DOUGLAS RD
SUITE 580
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CORPORATE SOLUTIONS LLC
520 BRICKELL KEY DR
1403
MIAMI, FL 33131 US

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: NATHAN BERMAN

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHACHNER, MARIO
Address: 806 DOUGLAS RD SUITE 850
City-St-Zip: CORAL GABLES, FL 33134

Title: DVP () Delete
Name: SCHACHNER, JOSE
Address: 806 DOUGLAS RD SUITE 850
City-St-Zip: CORAL GABLES, FL 33134

Title: DS () Delete
Name: TOHA, JAQUELINE
Address: 806 DOUGLAS ROAD, SUITE 580
City-St-Zip: CORAL GABLES, FL 33134

Title: DT () Delete
Name: LITVAK, GABRIELA
Address: 806 DOUGLAS RD SUITE 850
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCHACHNER, MARIO
Address: 520 BRICKELL KEY DR SUITE 324C
City-St-Zip: MIAMI, FL 33131

Title: DVP (X) Change () Addition
Name: SCHACHNER, JOSE
Address: 520 BRICKELL KEY DR STE 324C
City-St-Zip: MIAMI, FL 33131

Title: DS (X) Change () Addition
Name: TOHA, JAQUELINE
Address: 520 BRICKELL KEY DR STE 324C
City-St-Zip: MIAMI, FL 33131

Title: DT (X) Change () Addition
Name: LITVAK, GABRIELA
Address: 520 BRICKELL KEY DR STE 324C
City-St-Zip: CORAL GABLES, FL 33134

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: MARIO SCHACHNER

DP

04/16/2008

Electronic Signature of Signing Officer or Director

Date