2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000097594

Entity Name
DI-LITTLE HOUSE. INC.



FILED Apr 30, 2008 08:00 AM Secretary of State

Principal Place of Business

420 JEFFERSON AVENUE MIAMI BEACH, FL 33139

Mailing Address

420 JEFFERSON AVENUE MIAMI BEACH, FL 33139



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1050903

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE. STE. 3000 MIAMI, FL 33131

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

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

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 10. OFFICERS AND DIRECTORS HILE AMADEO, FRANK STREET ADDRESS 420 JEFFERSON AVENUE CITY-ST-ZIP MIAMI BEACH, FL 33139 TITLE ESTEFAN, EMILIO JR STREET ADDRESS 420 JEFFERSON AVENUE CITY-ST-ZIP MIAMI BEACH, FL 33139 VSTD TITLE ESTEFAN, GLORIA M NAME STREET ADDRESS 420 JEFFERSON AVENUE CITY - ST-ZIP MIAMI BEACH, FL 33139 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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:

ATURE AND TYPE OR PRINTED NAME OF SIGNING BALICER OR DIRECT

Daytime Phone