2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# P00000100406

Entity Name: ORCHID OBSESSIONS, INC.

Current Principal Place of Business:

2970 WEST 84TH ST
BAY 6 & 7
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

Current Mailing Address:

2970 WEST 84TH ST
BAY 6 & 7
HIALEAH GARDENS, FL 33016

New Mailing Address:

FEI Number: 65-1072399 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NAVAS, JUAN C
9052 N.W. 114TH TER.
HIALEAH GARDENS, FL 33018 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: PTD ( ) Delete
Name: NAVAS, JUAN C
Address: 9052 N.W. 114TH TER.
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VD ( ) Delete
Name: VELAZQUEZ, ALBERTO
Address: 9052 N.W. 114TH TER.
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: MD ( ) Delete
Name: NAVAS, SOCORRO
Address: 9052 NW 114 TER.
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D ( ) Delete
Name: SANDINO, ANAMARTHA
Address: 9052 NW 114 TERR.
City-St-Zip: HIALEAH GARDENS, FL 33018

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN CARLOS NAVAS PTD 04/23/2007
Electronic Signature of Signing Officer or Director Date