

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000117403

**FILED  
Jan 07, 2008  
Secretary of State**

**Entity Name:** LIMONAR COMPANY

**Current Principal Place of Business:**

**New Principal Place of Business:**

C/O 8290 NW 66TH ST.  
MIAMI, FL 33166 US

**Current Mailing Address:**

**New Mailing Address:**

P.O. BOX 524131  
MIAMI, FL 331524131

**FEI Number:** 98-0038699

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

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

FREED, OWEN S  
150 W. FLAGLER ST., #2200  
MIAMI, FL 33130 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

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

Title: DP ( ) Delete  
Name: FREED, OWEN S  
Address: 150 W. FLAGLER ST., #2200  
City-St-Zip: MIAMI, FL 33130

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

Title: S ( ) Delete  
Name: CURATOLO, MARIA V  
Address: 8290 NW 66TH ST.  
City-St-Zip: MIAMI, FL 33166

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: MARIA V. CURATOLO

S

01/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date