

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # P00000117915 1. Entity Name MARGRA, INC.	
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Principal Place of Business 8360 W. FLAGLER STREET, STE. 200 MIAMI, FL 33144	Mailing Address 8360 W. FLAGLER STREET, STE. 200 MIAMI, FL 33144
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DO NOT WRITE IN THIS SPACE

03262007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1125957	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RIOS, LUIS
8360 W. FLAGLER STREET, STE. 200
MIAMI, FL 33144**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	D NIETO, GRACIELA 2555 COLLINS AVE, #1203 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D NIETO, MARCELA 8360 W. FLAGLER STREET, STE. 200 MIAMI, FL 33144
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12. I hereby certify that the information supplied with this filing 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: *Graciela Nieto* X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #