2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 08:00 A Secretary of State

	WILLIAMP I	VEI OIVI			1	~ ,	
1. Entity Nam	MENT # P010000232	00				Secr	etary of St
Principal Place 203 SW 97 (MIAMI, FL 3	CT.	Mailing Address 203 SW 97 CT. MIAMI, FL 33174					1 1 11 12 22 42 22
C	OO NOT WRITE I	CE	04242007 4. FEI Numb 65-108	No Chg-P	CR2E03	Applied For Not Applicable 68.75 Additional ee Required	
PERDOMO 203 SW 97 MIAMI, FL	7 CT.	DO NOT WRITE IN THIS SPACE					
8. The above the obligat	named entity submits this statement for the tions of registered agent.	purpose of changing its registere	l ed office or register	ed agent, or bo	oth, in the State of Fl	orida. I am fa	miliar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and til	te if applicable. (NOTE: Registere	d Agent signature required	when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		00 May Be ed to Fees			
10,	OFFICERS AND DIR	ECTORS					. ,
NAME STREET ADDRESS	PERDOMO, JUAN 203 SW 97 CT.					·	
CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33174				U0 05/18	0080751 /07-800	013 086-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	/RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SF	PACE	
NAME STREET ADDRESS CITY-ST-ZIP						4 %	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with	e and accurate and that my signal	ture shall have the s	same legal effec	ot as if made under	oath: that I ar	n an officer or director I
SIGNAT		TVAN PONSO, ED NAME OF SIGNING OFFICER OR DIRECT	m. Pro.		4 Uthi Date	Day	rima Phone #