2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 30, 2007 8:00 am DOCUMENT # P01000038150 Secretary of State 1. Entity Name 03-30-2007 90146 026 ***150.00 CORVEG, INC. Principal Place of Business Mailing Address 10777 WEST FLAGLER STREET 10777 WEST FLAGLER STREET **MIAMI FL 33101 MIAMI FL 33101** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10777 W. FLAGLER STREET 10777 W. FLAGLER STREET Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 65-1099925 City & State-City & State Applied For MIAMI Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORDERO, PEDNO GREGORIO CORDERO, PEDRO GREGORIO Street Address (P.O. Box Number is Not Acceptable) 10777 WEST FLAGLER 10777 WEST FLAGLER STREET MIAMI FL 33101 M, Ami 8. The above named ontity 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 revisiating CATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ____ Addition TITLE Delete HILE CORDERO, PEDRO GREGORIO CORDERO PEDRO GREGORÍO 10777 WEST FLAGLER ST NAME NAME 10777 WEST FLAGLER STREET STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33101 CITY-ST-ZIP CITY ST ZIP HILL ☐ Delete Change ANTONIA C VEGA, ANTONIA C NAME NAME 10777 WEST FLAGLER STREET STREET ADDRESS STREET ADDRESS. **MIAMI FL 33101** CHY ST ZIP CHY ST ZIP mil ☐ Delete 2002 NAME NAME STREET ADORESS STREET ADDRESS CHY ST-709 CITY ST 7IP TITLE ☐ Delete Change Addition NAME MAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY ST 71P TITLE Delete uns Change Addition NAME NAML STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+SE ZIP THILE Delete DHE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - S1 - 7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

ANTONIA VEGA

SIGNATURE 3

FILED