
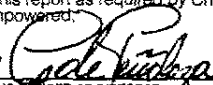


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000044108		
1. Entity Name PENSAMAG, CORPORATION		
Principal Place of Business 550 BILTMORE WAY #740 MIAMI, FL 33134	Mailing Address 550 BILTMORE WAY #740 MIAMI, FL 33134	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CEBALLOS, HAYDEE CPA 354 SEVILLA AVENUE CORAL GABLES, FL 33134		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small> (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP DE PENALOZA, CARMEN A 1110 BRICKELL AVENUE SEVENTH FLOOR MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP SANCHEZ-BUENO, JOSE G 1110 BRICKELL AVENUE SEVENTH FLOOR MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u>CARMEN DE PENALOZA</u>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



07202007 No Chg-P CR2E034 (11/05)

4. FEI Number 71-0904234	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U000000772491
08/22/07-80001-002 150.00

**DO NOT WRITE
IN THIS SPACE**

38-11-212927080
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