2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2008 08:00 A Secretary of State

ANNUAL REPURI					C	acratai	ry of Sta
1. Entity Nam	MENT # P010000534 RRIETA, INC.	82			3	eci etai	y or su
Principal Plac	e of Business	Mailing Address					
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* . 4 (21) 1 4 4				65-1117			Not Applicable
1	English Color Colo			5. Certificate of	of Status Desired		5 Additional
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	6. Name and Address of Current Re	gistered Agent	.,,		rikisi "P		
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19308 SW 80 CT				ַ טע	NOT W	RHE	
MIAMI, FL	33157			TIME	HIS SP	ACE.	product mass
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	named entity submits this statement for th	e purpose of changing its registere	ed office or register	ed agent, or both	n, in the State of Flo	rida. I am familia	with, and accept
the obligat	ions of registered agent						
SIGNATURE_							
	Signature, typed or printed name of registered agent and	itle if applicable (NOTE: Registere	d Agent signature required	when reinstating)		DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		00 May Be ed to Fees			
10.	OFFICERS AND DIF	RECTORS	ំ ដែលខ្លុំ ដោយ	· 图形性的原则	dochert in	er saufficial te f	was sa was
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CITY-ST-ZIP	CUTLER BAY, FL 33157			ide ille			
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CITY-ST-ZIP	CUTLER BAY, FL 33157						
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STREET ADDRESS		$\langle \cdot \rangle$					
CITY-ST-ZIP	\cap						

12. Thereby 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 custee employered 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 all other like empowered.

SIGNATURE: ________

RIGHATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/08

305-336-0555