

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000062788	
1. Entity Name SOUTH KENDALL WAREHOUSES, INC.	

Principal Place of Business 10748 SW 24 ST. MIAMI, FL 33165	Mailing Address P.O. BOX 558365 MIAMI, FL 33255-8365
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01152008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1124638	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ALONSO, ENRIQUE 10748 SW 24 ST. MIAMI, FL 33165

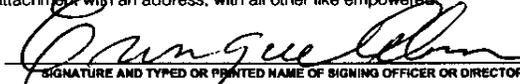
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	DATE 02/13/08-80072-025 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALONSO, ENRIQUE 10478 SW 24 ST. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALONSO, GRISEL 10748 SE 24 ST. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALONSO, ELENA 10748 SE 24 ST. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALONSO, ENRIQUE JR 10748 SE 24 ST. MIAMI, FL 33165
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:  **1/18/08** **305-220-4010**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Enrique Alonso