

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103554

FILED
Apr 26, 2007
Secretary of State

Entity Name: CAMILO DUQUE ENTERPRISES, INC.

Current Principal Place of Business:

17021 N. BAY ROAD
SUITE 903
SUNNY ISLES, FL 33160

New Principal Place of Business:

4590 N EAST 2ND AVENUE
MIAMI, FL 33137

Current Mailing Address:

17021 N. BAY RD.
SUITE 903
SUNNY ISLES, FL 33160

New Mailing Address:

4590 N EAST 2ND AVENUE
MIAMI, FL 33137

FEI Number: 65-1149956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE, CAMILO
17021 NORTH BAY ROAD
903
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

DUQUE, CAMILO
4590 N EAST 2ND AVENUE
MIAMI, FL 33137 US

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.

SIGNATURE: CAMILO DUQUE

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUQUE, CAMILO
Address: 17021 NORTH BAY ROAD SUITE #903
City-St-Zip: SUNNY ISLES, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUQUE, CAMILO
Address: 4590 N EAST 2ND AVENUE
City-St-Zip: MIAMI, FL 33137 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAMILO DUQUE

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date