2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# P01000114287

Entity Name: CHARISPROS FLORIDA, INC.

Current Principal Place of Business:

ONE S.E. THIRD AVENUE
SUITE 2250
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

ONE S.E. THIRD AVENUE
SUITE 2250
MIAMI, FL 33131

New Mailing Address:

FEI Number: 01-0594931 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMKGS REGISTERED AGENTS, INC
2250 SUNTRUST INTERNATIONAL CENTER
ONE S.E. THIRD AVENUE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

AMKE REGISTERED AGENTS LLC
2250 SUNTRUST INTERNATIONAL CENTER
ONE S.E. THIRD AVENUE
MIAMI, FL 33131 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: ARTURO J. ABALLI 04/26/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DIAZ, FLORENTINO
Address: 936 ALGARINGO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: JAUREGUIZAR, JUAN
Address: 936 ALGARINGO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: SASTRE, ARISTIDES
Address: 936 ALGARINGO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JUAN JAUREGUIZAR D 04/26/2007
Electronic Signature of Signing Officer or Director Date