## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 27, 2007 08:00 AN ıte

	AITITOAL					
DOCUMENT # P01000117214  1. Entity Name CUELLAR & VILLEGAS CORPORATION						Secretary of St
Principal Place 609 N.W. 12 MIAMI, FL 33	TH AVE.	609 N.W. 12TH AVE. MIAMI, FL 33136				
D	O NOT WRITE	CE	04162007 4. FEI Numb 03-046	No Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required	
VILLEGAS, JESUS     179 N. COCONUT PALM BOULEVARD     PLANTATIN KEY COLONY     TAVERNIERE, FL 33070      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. In the obligations of projected agent.						
the obligat	named entity submits this statement for ions of registered agent.	he purpose of changing its register	ed office or registe	red agent, or bo	ith, in the State of Flo	rida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of rogistered agent an	f Nie if applicable (NOTE, Registers	ad Agent signature required	d when re-installing)		DATE
FILE NOWII! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finant Trust Fund Contribution.				.00 May Be led to Fees		
MO. THE NAME	OFFICERS AND D S SEVILLANO, MARIA D	RECTORS				
STREET ADDRESS CITY-ST-ZIP	710 E. 16 PLACE HIALEAH, FL 33012	1		- U000 957107	000736469 07-80078-004 150.0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLEGAS, JESUS 179 N. COCONUT PALM BOULE\ TAVERNIER, FL 33070	/ARD				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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: MOUND SOULAND BY E SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #