2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000002749 1. Entity Name EYMOL CORP.						Secretary of Sta			
Principal Pla	ice of Business	Mailing Address		L	-				
8300 NW 53 STREET, STE. 350 MIAMI, FL 33166		7105 SW 8 STREET MIAMI, FL 33144	, STE 306						
						# T	41		
2. Principal	Place of Business - No P.O Box #	3. Mailing Address]	1941 - 1941 - 1944 - 19	 	7007 7 JUNE 11	
Suite. Apt. #, etc.		Suite, Apt. #, etc.			05012007 Chg-P CR2E034 (12/06)				
City & Sta	ate	City & State			4. FEI Number				oplied For
Zip	Country	Zıp	Coun	try	26-0011	of Status Desired	\$	8.75 Ad	ot Applicable ditional
	6 Name and Address of Curre	ant Pagistared Agent			<u> </u>		F	ee Require	d
•	6. Name and Address of Curre	aur veðisreien Aðeur		Name	/. Name and /	Address of New R	registered Ag	jaut	<u></u>
MOLINA, EYBAR 4839 NW 116 AVE MIAMI, FL 33178				Street Address (P.O. Box Number is Not Acceptable)					
			[City			FL	Zip Cod	ө
the obliga	Signature, typed or printed name of registered ag	gent and title if applicable (i	· · · · · ·	Agent signature requi	1		DATE		
the obliga SIGNATURE	ations of registered agent.	gent and bite if applicable (I	ıpaıgn Finan	cing \$:	5.00 May Be dded to Fees		DATE		
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12. I bereby 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 chapter 607, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF SKINTED HAME OF SIGNING OFFICER OR DIRECTOR

05.01-07 305 2763443

Daytime Phone 4