

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002749

Entity Name: EYMOL CORP.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

8300 NW 53 STREET, STE. 350
MIAMI, FL 33166

New Principal Place of Business:

7105 SW 8TH STREET
SUITE 306
MIAMI, FL 33144 US

Current Mailing Address:

7105 SW 8 STREET, STE 306
MIAMI, FL 33144

New Mailing Address:

7105 SW 8TH STREET
SUITE 306
MIAMI, FL 33144 US

FEI Number: 26-0011627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINA, EYBAR
4839 NW 116 AVE
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOLINA, EYBAR
Address: 4839 NW 116 AVE
City-St-Zip: MIAMI, FL 33166

Title: SD () Delete
Name: JIMENEZ, CLAUDIA
Address: 4839 NW 116 AV
City-St-Zip: DORAL, FL 33178

Title: VPD () Delete
Name: ARIAS, SAMUEL E
Address: 12871 NW 8 ST
City-St-Zip: MIAMI, FL 33182

Title: TD () Delete
Name: ARIAS, FABIOLA
Address: 12871 NW 8 ST
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOLINA, EYBAR
Address: 4839 NW 116 AVE
City-St-Zip: MIAMI, FL 33166 US

Title: SD (X) Change () Addition
Name: JIMENEZ, CLAUDIA
Address: 4839 NW 116 AV
City-St-Zip: DORAL, FL 33178 US

Title: VPD (X) Change () Addition
Name: ARIAS, SAMUEL E
Address: 12871 NW 8 ST
City-St-Zip: MIAMI, FL 33182 US

Title: TD (X) Change () Addition
Name: ARIAS, FABIOLA
Address: 12871 NW 8 ST
City-St-Zip: MIAMI, FL 33182 US

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: EYBAR MOLINA

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date