2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 16, 2007 08:00 AM Secretary of State

ANNUAL REPORT						
DOCUMENT # P0200000 1. Entity Name POKER RUN ACQUISITIONS, INC						
Principal Place of Business 201 SOUTH BISCAYNE BLVD., SUITE 850 MIAMI, FL 33131	Mailing Address 201 SOUTH BISCAYNE BLVD., MIAMI, FL 33131	SUITE 850				

01082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0533850 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSSZ FIU CORPORATION DO NOT WRITE 201 SOUTH BISCAYNE BLVD. **SUITE 850** IN THIS SPACE MIAMI, FL 33131 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. THILE 100000586326 01/16/07-80049-015 150.00 CHEEZEM, JAN CARSON NAME STREET ADDRESS 201 SOUTH BISCAYNE BLVD., SUITE 850 MIAMI, FL 33131 CITY-\$T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MALE NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE THILE MAME STREET ADDRESS CITY - ST - ZIP 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 cath, that I am an officer or director of the corporation or the receiver of 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan Carson Clieazen 1/11/07

305 702 3000

Date

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