2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000014282

1. Entity Name
BESPHER & MELY SHOW CORPORATION

FILED Aug 10, 2007 08:00 All Secretary of State

Principal Place of Business

13322 SW 8TH LANE MIAMI, FL 33184 Mailing Address

13322 SW 8TH LANE MIAMI, FL 33184



06042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 04-3633224 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytme Phone #

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

ESPINOZA, JORGE 13322 SW 8TH LANE MIAMI, FL 33184

SIGNATURE: _y

DO NOT WRITE IN THIS SPACE

					, ·
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				required when reinstating)	DATE
FILE NOW!! FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS				(
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ESPINOZA, JORGE 13322 SW 8TH LANE MIAMI, FL 33184		i		U00000771874 08/10/07-80004-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ESPINOZA, SILVIA 13322 SW 8TH LANE MIAMI, FL 33184			:	09/10/0/-80004-050 120*00
. TITLE NAME STREET ADDRESS CITY-ST-ZIP			ŗ	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		IN '	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby 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					

ONING OFFICER OR DIRECTOR