


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90273 017 ***150.00

DOCUMENT # P02000047594 1. Entity Name CURURU, INC.																											
Principal Place of Business 2735 POLO ISLAND DRIVE # K-103 WELLINGTON, FL 33414 US		Mailing Address 2735 POLO ISLAND DRIVE # K-103 WELLINGTON, FL 33414 US																									
2. Principal Place of Business - No P.O. Box # 500 South Dixie Highway Suite, Apt. #, etc. 201 City & State Coconut Gables, FL Zip 33146 Country US		3. Mailing Address 500 South Dixie Highway Suite, Apt. #, etc. 201 City & State Coconut Gables, FL Zip 33146 Country US																									
																											
		04172007 Chg-P CR2E034 (12/06)																									
4. FEI Number 20-0125800		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent TALIA BROWN, JUAN CRUZ 2735 POLO ISLAND DRIVE # K-103 WELLINGTON, FL 33414		7. Name and Address of New Registered Agent Name Talia Brown, Juan Cruz Street Address (P.O. Box Number is Not Acceptable) 500 South Dixie Highway Suite 201 City Coconut Gables FL Zip Code 33146																									
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:70%;">NAME TALIA BROWN, JUAN CRUZ</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>2735 POLO ISLAND DRIVE, # K-103</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td>WELLINGTON, FL 33414</td> <td></td> </tr> </table>		TITLE	P	NAME TALIA BROWN, JUAN CRUZ	<input type="checkbox"/> Delete	STREET ADDRESS		2735 POLO ISLAND DRIVE, # K-103		CITY - ST - ZIP		WELLINGTON, FL 33414		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:70%;">NAME Talia Brown, Juan Cruz</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>500 South Dixie Highway, Suite 201</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td>Coconut Gables, FL 33146</td> <td></td> </tr> </table>		TITLE	P	NAME Talia Brown, Juan Cruz	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		500 South Dixie Highway, Suite 201		CITY - ST - ZIP		Coconut Gables, FL 33146	
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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 changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <u>J. Cruz Talia Brown</u> <u>Juan Cruz Talia Brown</u> <u>4/20/07</u> <u>(355) 662-9649</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)</small>																											