## 2007-FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: \( \alpha \)

## Apr 19, 2007 8:00 am Secretary of State DOCUMENT # P02000062628 1. Entity Name 04-19-2007 90411 014 \*\*\*150.00 BODEGON CUBANO, INC. Principal Place of Business Mailing Address 3477 NW 72 AVE 5477 NW-72 AVE MIAMI FL 33166 MIAMI FL 33166 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 7845 N.W. 5775 9860 S.W. 12Th TERRACE Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Suite C City & State City & State 4. FEI Number Applied For 33-1011225 DORAL FLORIDA MIAMI Not Applicable Country Country Zip 33174 \$8.75 Additional 5. Certificate of Status Desired DADE DADE. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORIEGA, MELVIN Street Address (P.O. Box Number is Not Acceptable) 5477-NW 72-AVE **MIAMI FL 33166** 9860 S.W. 12" TERRACE. 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when remistating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THIE Delete TITLE Cnange Addition NORIEGA, MELVIN J NAM NAMÉ. 9860 S.W. 15TH TERRACE. 5477 NW 72 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33166 CHY-ST-ZIP CHY-SI-7IP TD THE Deicte TITLE Addition NORIEGA, MELVIN F NAME NAME 9860 5.W. 1374 TERRACE. 5477 NW 72 AVE STREET ADDRESS STREET ADORESS MIAMI FL 33166-> CHY-SI-ZIP CITY-ST-ZIP SD DILE Delete Addition NORIEGA, MELVIN F NAMI 9860 SW. 12 TH TERRACE. 5477 NW 77 AVE. STREET ADDRESS STREET ADDRESS CITY - ST - ZIP MIAMI FL 32166 -CHY ST-ZIP SITIE ☐ Detete IIILE Addition NAM NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP THEF Delete HHE ☐ Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY-S1-78P CUY-ST-ZIE Delete HILL THE Addition Change NAM NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am an efficer or director of the corporation or the receiver contracted 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.

MEX VIN F. NORIEGES SEC- 4/12/201 (305) 805-7888

ME OF SIGNANG OFFICER OR DIRECTOR

Days Days Phone #

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