

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070679

FILED  
Sep 04, 2008  
Secretary of State

Entity Name: CABOCHON OF WATERWAY 7, INC.

## Current Principal Place of Business:

19575 BISCAYNE BLVD #069  
AVENTURA, FL 33180

## New Principal Place of Business:

20775 NE 32ND PLACE  
AVENTURA, FL 33180

## Current Mailing Address:

19575 BISCAYNE BLVD #069  
AVENTURA, FL 33180

## New Mailing Address:

20775 NE 32ND PLACE  
AVENTURA, FL 33180

FEI Number: 04-3693388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALAZRACHI, DANIELA  
19501 W COUNTRY CLUB DR #910  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

ALAZRACHI, DANIELA  
20775 NE 32ND PLACE  
AVENTURA, FL 33180 US

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: DANIELA ALAZRACHI

09/04/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: THOMAS, JOYCE  
Address: 21205 YACHT CLUB DR #2209  
City-St-Zip: AVENTURA, FL 33180

Title: VPST ( ) Delete  
Name: ALAZRACHI, DANIELA  
Address: 19501 W COUNTRY CLUB DR #910  
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Delete  
Name: ALAZRACHI, DANIELA  
Address: 19501 W COUNTRY CLUB DR #910  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPST (X) Change ( ) Addition  
Name: ALAZRACHI, DANIELA  
Address: 20775 NE 32ND PLACE  
City-St-Zip: AVENTURA, FL 33180

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DANIELA ALAZRACHI

VP

09/04/2008

Electronic Signature of Signing Officer or Director

Date