2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081415

Entity Name: THE MEMORY SECRET INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2875 N.E. 191ST STREET 2875 N.E. 191ST STREET 302

302

AVENTURA, FL 33180 AVENTURA, FL 331802806 US

Current Mailing Address: New Mailing Address:

2875 N.E. 191ST STREET 2875 N.E. 191ST STREET

AVENTURA, FL 33180 US AVENTURA, FL 331802806 US

FEI Number: 48-1258664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

YH&S ACCOUNTING & FINANCIAL CONSULTANTS 2875 N.E. 191ST STREET, SUITE 302 AVENTURA, FL 331802806 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CONDE MORALES, ANA ISABEL CONDE MORALES, ANA ISABEL Name: Name:

2875 N.E. 191ST STREET, SUITE 302 2875 N.E. 191ST STREET, SUITE 302 Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: AVENTURA, FL 331802806 US

() Delete Title: Title: (X) Change () Addition Name: CALVO MONDELO, FERNANDO Name: CALVO MONDELO, FERNANDO 2875 N.E. 191ST STREET, SUITE 302 Address: 2875 N.E. 191ST STREET, SUITE 302 Address:

AVENTURA, FL 33180 US AVENTURA, FL 331802806 US City-St-Zip: 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: ANA ISABEL CONDE MORALES 04/30/2007 D

Electronic Signature of Signing Officer or Director

Date