2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 17, 2008 08:00 AM Secretary of State DOCUMENT # P02000090274 1. Entity Name MANÚLLA, INC. Principal Place of Business Mailing Address 210 E. COMMERCIAL BLVD 210 E. COMMERCIAL BLVD LAUDERDALE BY THE SEA, FL 33308 LAUDERDALE BY THE SEA, FL 33308 01142008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1637314 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOODY, HOARCE A DO NOT WRITE 2864 REMINGTON GREEN CIRCLE TALLAHASSEE, FL 32317 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_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Π, Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE KEANEY, THOMAS JOSEPH NAME STREET ADDRESS 210 E. COMMERCIAL BLVD CITY-\$T-ZIP LAUDERDALE BY THE SEA, FL 33308 U00000788314 TITLE 01/18/08-80036-011 150.00 NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 7171 E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

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:

STREET ADDRESS

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OFFICEROR

01/15/08

954-9372121

Dayline Phone #

FILED