## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 05, 2007 08:00 A Secretary of State

DOCUMENT # P02000105182  1. Entity Name BOOM-LAND C.A., INC.				Secretary of Sta			
Principal Place 6950 NW 77 MIAMI, FL 3	7 CT	failing Address PO BOX 520687 MIAMI, FL 33152	·				
С	O NOT WRITE I	CE	03162007 No Chg-P CR2E034 (11/05)  4. FEI Number				
	Z, JOSE M ESQ. E LAGOON DR	DO NOT WRITE IN THIS SPACE					
8. The above the obliga SIGNATURE.	e named entity submits this statement for the tions of registered agent.  Signature, typed or printed name of registered agent and talk		 ad office or registe     Agentalgnature requirer		, in the State of Flo	rida. I am familiar DATE	with, and accept
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			<del></del>	.00 May Be ded to Fees			·
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D TERNER, SALOMON 6950 NW 77 CT MIAMI, FL 33166	CTORS				(00069151)	3 -002 150.00
NAME STREET ADDRESS CITY+ST-ZIP		•			U4/13/	V(-80014	-002 150.00
TITLE NAME STREET ADDRESS CHY+ST-ZIP		, .		DO I	NOT W	RITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN T	'HIS SP	ACE	
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the corchanged,	certify that the information supplied with this on this report or supplemental report is true portation or the receiver of trusted enhanced or on an attachment with an attacks, with a	iling does not qualify for the exe and accurate and that my signat d to execute this report as requir Il other like empowered.	mptions contained ure shall have the ed by Chapter 607	d in Chapter 119, same legal effect 7, Florida Statutes	Florida Statutes. I ( as if made under o and that my name	urther certify that ath; that I am an o appears in Block	the information ifficer or director 10 or Block 11 if

3/27/07

305-266-9000

Daylime Phone #