2007 FOR PROFIT CORPORATION

FILED . ANNUAL REPORT May 01, 2007 08:00 AM DOCUMENT # P02000121753 Secretary of State NICARAGUITA SERVICES & RETAIL INC. Principal Place of Business Mailing Address 10760 W FLAGLER ST 10760 W FLAGLER ST **STE # 3 STE # 3** SWEETWATER, FL 33174 SWEETWATER, FL 33174 CR2E034 (11/05) 04252007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 35-2195333 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MORALES, JOSE A 10760 W FLAGLER ST # 3 SWEETWATER, FL 33174 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. CIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. . After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE MORALES, RUTH J NAME 10760 W FLAGLER ST #3 U00000753943 STREET ADDRESS CITY-ST-ZIP SWEETWATER, FL 33174 05/22/07-80040-020 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 of powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AODRESS CITY-ST-ZIP