2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002007

Entity Name: MAJUVA ENTERPRISES INC.

FILED Feb 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 BAYVIEW DR 500 BAYVIEW DRIVE

SUITE 220 SUITE 220

SUNNY ISLES, FL 33160 US SUNNY ISLES BEACH, FL 33160 US

Current Mailing Address: New Mailing Address:

500 BAYVIEW DR 500 BAYVIEW DRIVE

SUITE 220 SUITE 220

SUNNY ISLES, FL 33160 US SUNNY ISLES BEACH, FL 33160 US

FEI Number: 13-4233749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VALENCIA, MARIA J P MINONES, CLAUDIO A SENIOR

500 BAYVIEW DR 500 BAYVIEW DRIVE

SUITE 220 SUITE 220

SUNNY ISLES, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: CLAUDIO ALBERTO MINONES 02/14/2008

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 VALENCIA, MARIA J P Name: Name: MINONES, CLAUDIO A CEO 500 BAYVIEW DRIVE SUITE 220 500 BAYVIEW DR SUITE 220 Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 US City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VΡ Title: (X) Change () Addition () Delete MINONES, CLAUDIO A VP Name: Name: LOPEZ, VALENCIA M DIR 500 BAYVIEW DR SUITE 220 Address: 500 BAYVIEW DRIVE SUITE 220 Address: SUNNY ISLES, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: CLAUDIO A. MINONES CFO 02/14/2008