2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 08:00 AN Secretary of State

The cutton Name and Address of Current Registered Agent SCOBAR, MORAIMA E 3342 WILLAGE GREEN DRIVE MIAMI, FL 33175 Mailing Address 3342 VILLAGE GREEN DRIVE MIAMI, FL 33175 DO NOT WRITE IN THIS SPACE O4152008 No ChgP CR2E034 (17105) 4. FEI Number 59-3766618 5. Certificate of Status Desired \$4.75 Additional Fee Required Fee Required Fee Required SCOBAR, MORAIMA E 3342 VILLAGE GREEN DRIVE MIAMI, FL 33175 DO NOT WRITE IN THIS SPACE S. 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 femiliar with, and accept the obligations of registered agent. SIGNATURE FILE NOWILI FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. \$5.00 May 86 Added to Fees O57/20/08-90109-014 158.75 10. OFFICERS AND DIFFECTORS TITLE MAKE SIGNAL AGRESS SIG		AIIIVAL I	761 9171	, <u> </u>	_		.	
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	STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	'	

IN THIS SPACE

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 pestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an adverse, with all other like empowered.

SIGNATURE:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-08

786-251-8276

Daytime Phone #