2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026097

Entity Name: N & R SAGOL CORPORATION

FILED Jul 09, 2007 Secretary of State

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

1709 WHITEHALL DRIVE # 201 1535 SW 97 WAY DAVIE, FL 33324 DAVIE, FL 33324

Current Mailing Address: New Mailing Address:

1709 WHITEHALL DRIVE # 201 1535 SW 97 WAY DAVIE, FL 33324 DAVIE, FL 33324

FEI Number: 20-0320772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAGOL, NORAH C SAGOL, NORAH C PRESID. 1709 WHITEHALL DRIVE # 201 1535 SW 97 WAY DAVIE, FL 33324 DAVIE, FL 33324 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: NORAH CARMONA SAGOL 07/09/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: CARMONA DE SAGOL, NORAH SAGOL, NORAH C PRESID. Name: Name: 1709 WHITEHALL DR. #201 Address: 1535 SW 97 WAY Address:

DAVIE, FL 33324 City-St-Zip: **DAVIE, FL 33324**

Title: VΡ Title: VΡ (X) Change () Addition () Delete SAGOL, RICARDO A VICEPRE Name: SAGOL, RICARDO Name:

1580 SAWGRASS CORPORATE PARKWAY, STE 130 Address: 1535 SW 97 WAY Address: SUNRISE, FL 33323 **DAVIE, FL 33324** 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.

Ρ SIGNATURE: NORAH CARMONA SAGOL 07/09/2007