

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030708

Entity Name: FS UNIT 3007, INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

1435 BRICKELL AVE.
STE 3007
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-0749502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOLCH, SALVI
Address: COL. PENA BLANCA SANTA FE 01210
City-St-Zip: MEXICO, D.F., MX

Title: ST () Delete
Name: SILVA, JOSE C
Address: COL. PENA BLANCA SANTA FE 01210
City-St-Zip: MEXICO, D.F., MX

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FOLCH, SALVI
Address: COL. PENA BLANCA SANTA FE 01210
City-St-Zip: MEXICO, D.F., MX

Title: STD (X) Change () Addition
Name: SILVA, JOSE CARLOS
Address: COL. PENA BLANCA SANTA FE 01210
City-St-Zip: MEXICO, D.F., MX

Title: VP () Change (X) Addition
Name: FOLCH, ERIC
Address: 2335 NORTH MORELAND, #304
City-St-Zip: CLEVELAND, OH 44120

I hereby certify that the information supplied with this filing does not qualify for the 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: SALVI FOLCH

P/D

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date