



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000034638	
1. Entity Name YOSEFVAR ELECTRIC CORP.	

Principal Place of Business 13873 SW 256 TERRACE HOMESTEAD, FL 33032	Mailing Address 13873 SW 256 TERRACE HOMESTEAD, FL 33032
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DO NOT WRITE IN THIS SPACE

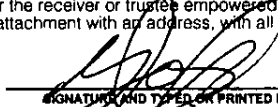
	
01042008	No Chg-P
CR2E034 (11/05)	
4. FEI Number 13-4245494	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VARONA, YOSEF 13873 SW 256 TERRACE HOMESTEAD, FL 33032
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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. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARONA, YOSEF 13873 S.W. 256 TERRACE HOMESTEAD, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEDELL, JUAN C 2971 SW 16 TERRACE APT #3 MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, FREDY 10791 S.W. 51 DRIVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  Yosef Varona / President	01/04/08 (305) 257-3336
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>