2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 18, 2007 8:00 am Secretary of State

DOCUMENT # P03000050768 1. Entity Name CRED- PRO, INC.					06-18-2007 90004 033 ***150.00						
Principal Place of Business Mailing Address 22453 SW 66TH AVE SUITE 109 21271 SAWMILL CT BOCA RATON, FL 33428 BOCA RATON, FL 33498				٠,							
Principal Place of Business - No P.O. Box # 3. Mailing Address											
2127/ SAWMILL CT Suite, Apt. #, etc. Suite, Apt. #, etc.						6142007	Chg-P	CR2E034	(12/06)		
City & State	RATON, FL	City & State			4.	4. FEI Number Applied For 13-4253231 Not Applied be				 -	
Zip 33 Y	98 Country US	Zip	Coun	itry			of Status Desired	Fe	1.75 Addi e Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
MUNOZ, JAIRO 21271 SAWMILL CT				Street Address (P.O. Box Number is Not Acceptable)							
BOCA RATON, FL 33498											
,				City FL Zip Code							
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											
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finan Trust Fund Contribution.					\$5.00 Added t	May Be to Fees	In accordance corporation did	with s. 607.19 not receive t	93(2)(b), he prior r	F.S., the notice.	
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AND D	RECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MUNOZ, JAIRO 22453 SW 66TH AVENUE #109 BOCA RATON, FL 33428	☐ Delete		AE EET ADDRESS <	212	71 51	JAIRO GWMIL YON, FO	ر ہے۔	Change	Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. 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 empty grad 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 as address, with all other like empowered.											