2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072062

Entity Name: OCRAEV MANAGEMENT CORPORATION

FILED Apr 03, 2007 Secretary of State

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

1895 W FLAGLER ST STE 219 1835 W FLAGLER ST STE 201-219

MIAMI, FL 33135 US MIAMI, FL 33135 US

Current Mailing Address: New Mailing Address:

 1895 W FLAGLER ST
 1835 W FLAGLER ST

 STE 219
 STE 201-219

 MIAMI, FL 33135
 US

 MIAMI, FL 33135
 US

FEI Number: 20-0412698 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:

GALIZIA, GIOVANBATISTA F
956 GOLDEN CANE DRIVE
WESTON, FL 33327 US
GALIZIA, GIOVANBATISTA F
4074 WEST WHITEWATER AVE
WESTON, FL 33332 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: GIOVANBATISTA GALIZIA 04/03/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GALIZIA, GIOVANBATISTA F GALIZIA, GIOVANBATISTA F Name: Name: 956 GOLDEN CANE DRIVE 4074 WEST WHITEWATER AVE Address: Address: City-St-Zip: WESTON, FL 33327 US City-St-Zip: WESTON, FL 33332 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: RUIZ, NAYIBER Name: RUIZ, NAYIBER

Address: 956 GOLDEN CANE DRIVE Address: 4074 WEST WHITEWATER AVE City-St-Zip: WESTON, FL 33327 US City-St-Zip: WESTON, FL 33332 US

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: GIOVANBATISTA GALIZIA P 04/03/2007