

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 19, 2008 8:00 am**  
**Secretary of State**

05-19-2008 90034 025 \*\*\*150.00

<b>DOCUMENT # P03000090002</b>					
<b>1. Entity Name</b> SANLORE SERVICES, INC.					
<b>Principal Place of Business</b> 12000 BISCAYNE BLVD SUITE 307 MIAMI, FL 33181 US			<b>Mailing Address</b> 606 NE 25 AVE. HALLANDALE BEACH, FL 33009 US		
<b>2. Principal Place of Business - No P.O. Box #</b> 9999 NE 2ND AVENUE			<b>3. Mailing Address</b> Suite, Apt. #, etc. 218		
<b>City &amp; State</b> MIAMI SHORES			<b>City &amp; State</b> MIAMI SHORES		
<b>Zip</b> 33138		<b>Country</b> USA		<b>4. FEI Number</b> 14-1895980	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> ALEJANDRA SAAVEDRA E 606 NE 25 AVE. HALLANDALE BEACH, FL 33009			<b>7. Name and Address of New Registered Agent</b> Name: UGO V. CHIARATO, C.P.A. Street Address (P.O. Box Number is Not Acceptable): 9999 NE 2ND AVENUE - SUITE 218 City: MIAMI SHORES FL Zip Code: 33138		
<b>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.</b> SIGNATURE: <i>Ugo V. Chiarato</i> <span style="float: right;">DATE: MAY 14, 2008</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 12, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> DIR PRESIDENT/D	<b>NAME</b> SAAVEDRA, ALEJANDRA E		<b>TITLE</b> PRESIDENT/DIRECTOR	<b>NAME</b> ALEJANDRA E. SAAVEDRA	
<b>STREET ADDRESS</b> 606 NE 25 AVE.	<b>CITY-ST-ZIP</b> HALLANDALE BEACH, FL 33009		<b>STREET ADDRESS</b> 606 NE 25 AVE	<b>CITY-ST-ZIP</b> HALLANDALE BEACH FL 33009	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP	
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<b>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</b>					
<b>SIGNATURE:</b> <i>[Signature]</i> SAAVEDRA, PRESIDENT			DATE: MAY 14, 2008 (305) 899.5099		

ATTACHMENT

Florida Dept. Of State  
Division of Corporations

40103926

May 13, 2008

Sanlore Services P 03000090001 / FEIN 14-1895980

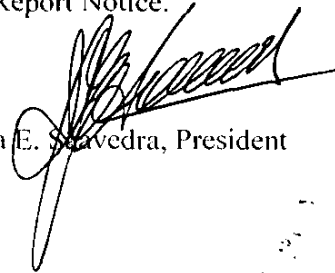
Dear Sirs,

This to officially confirm , under penalty of perjury, that:

I have never received Florida Annual Report Notice.

Please accept my reinstatement . With regards,

Alejandra E. Servedra, President

A handwritten signature in black ink, appearing to read 'Alejandra E. Servedra', written over the printed name.