## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000099862

Entity Name: FISPAL MIAMI, INC.

FILED Apr 27, 2007 Secretary of State

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

2655 LE JEUNE RD. 2 ALHAMBRA PLAZA

SUITE #311 SUITE 102

CORAL GABLES, FL 33143 CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

C/O PAULO MIRANDA ONE S.E. 3RD AVENUE 28TH FLOOR MIAMI, FL 33131

FEI Number: 33-1090693 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:

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE
28TH FLOOR
AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE
25TH FLOOR

28TH FLOOR 25TH FLOOR MIAMI, FL 33131 US MIAMI, FL 33131 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: BY ANGELICA M CHIRU, ASSISTANT SECRETARY 04/27/2007

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 SANTOS NETO, RICARDO J SANTOS NETO, RICARDO J Name: Name: 2655 LE JEUNE RD., SUITE #311 2 ALHAMBRA PLAZA, SUITE 102 Address: Address: City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: CORAL GABLES, FL 33134

Title: (X) Change ( ) Addition Title: () Delete Name: SANTOS NETO, RICARDO M Name: SANTOS NETO, RICARDO M 2655 LE JEUNE RD., SUITE #311 2 ALHAMBRA PLAZA, SUITE 102 Address: Address: CORAL GABLES, FL 33143 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

Title: PST () Delete Title: PST (X) Change () Addition Name: DOMINGUEZ, OSCAR Name: DOMINGUEZ, OSCAR

Address: 2655 LE JEUNE RD., SUITE #311 Address: 2 ALHAMBRA PLAZA, SUITE 102 City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify 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: OSCAR DOMINGUEZ P 04/27/2007