


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2008 8:00 am**  
**Secretary of State**

01-17-2008 90029 001 \*\*\*150.00

<b>DOCUMENT # P03000110367</b> 1. Entity Name <b>GRAND ABBACO DEVELOPMENT OF VILLAGE WEST CORPORATION</b>	
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Principal Place of Business <b>2903 SALZEDO ST CORAL GABLES, FL 33134-6618</b>	Mailing Address <b>2903 SALZEDO ST CORAL GABLES, FL 33134-6618</b>
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**DO NOT WRITE IN THIS SPACE**



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-0287835</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent  <b>MARRERO, JULIO C 2903 SALZEDO ST CORAL GABLES, FL 33134-6618</b>
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**DO NOT WRITE  
IN THIS SPACE**

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) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P MARRERO, ROSA 2903 SALZEDO ST CORAL GABLES, FL 331346618</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V BENITEZ, ORLANDO 2903 SALZEDO ST CORAL GABLES, FL 331346618</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S MARRERO, ROSA 2903 SALZEDO STREET CORAL GABLES, FL 33134</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>T MUSKAT, PHILLIP 2903 SALZEDO ST CORAL GABLES, FL 331346618</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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:** Rosa Marrero **01/14/08** **305-446-0143**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #