

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148700

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: REEF DEVELOPMENT, INC.

**Current Principal Place of Business:**

16137 BISCAYNE BLVD  
MIAMI, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

16137 BISCAYNE BLVD  
MIAMI, FL 33160

**New Mailing Address:**

FEI Number: 20-0490099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAX HOUSE CORPORATION  
1100 SOUTH FEDERAL HWY  
2ND FLOOR  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PRADINES, ROMEU  
Address: 16137 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33160

Title: D ( ) Delete  
Name: PRADINES, NAYLA  
Address: 16137 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33160

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROMEU PRADINES

D

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date