2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 29, 2007 08:00 AM Secretary of State

1. Entity Nam ONTHEF	LY, INC.			The second secon	
Principal Place of Business Making Address 2124 TYLER ST. 18925 NE 18TH AVE. HOLLYWOOD, FL 33020 NORTH MIAMI BEACH, FL 33179			The second secon		
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				01102007 4. FEI Numb 20-058	
			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 Signature, typed or purised name of registered agent and file if applicable. [NOTE Registered Agent signature required when rehastated] PATE FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 100000001-017 150 00					
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P MASINTAPAN, NITI 18925 NE 18TH AVE. NORTH MIAMI BEACH, FL 33179	TORS			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	NOT WRITE THIS SPACE
NAME STREET ADDRESS DITY-ST-ZIP 12. I hereby c indicated of the corr changed,	certify that the information supplied with this fi on this report or supplemental report is true a poration of the reseiver or trusted empowere or on an attachment with an address, with all	ing does not qualify for the exe nd accurate and that my signal to execute this report as required other like empowered.	imptions contained ure shall have the red by Chapter 607	I in Chapter 11s same legal effec , Florida Statute	9, Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if