

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010203

FILED
May 03, 2007
Secretary of State

Entity Name: ROBSON DAMASCENO ALBUQUERQUE INC.

Current Principal Place of Business:

4040 CRYSTAL LAKE DR.
APT. 201
POMPANO BEACH, FL 330641256 US

New Principal Place of Business:

Current Mailing Address:

4040 CRYSTAL LAKE DR.
APT. 201
POMPANO BEACH, FL 330641256 US

New Mailing Address:

FEI Number: 20-0602083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBUQUERQUE, ROBSON D
4040 CRYSTAL LAKE DR.
APT. 201
POMPANO BEACH, FL 330641256 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: P () Delete
Name: ALBUQUERQUE, ROBSON D
Address: 4040 CRYSTAL LAKE DR. 201
City-St-Zip: POMPANO BEACH, FL 330641256 US

Title: VP () Delete
Name: ASSIS, CELIDIO S JR.
Address: 1360SW 47TH AVE.
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: T () Delete
Name: ALBUQUERQUE, ROBSON D
Address: 4040 CRYSTAL LAKE DR .201
City-St-Zip: POMPANO BEACH, FL 330641256 US

Title: 2T (X) Delete
Name: CRISTOVAN, ANTONIO M
Address: 4344 NW 9TH AVE APT 179
City-St-Zip: POMPANO BEACH, FL 330641256 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CRISTOVAN, ANTONIO M
Address: 4344 NW 9TH AVE APT 179
City-St-Zip: POMPANO BEACH, FL 330641256 US

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: ROBSON D ALBUQUERQUE

P

05/03/2007

Electronic Signature of Signing Officer or Director

Date