## 2008 FOR PROFIT CORPORATION ANNUAL REPORT



FILED
Apr 25, 2008 8:00 am
Secretary of State

DOCUMENT # P04000016622  1. Entity Name CARDIF SERVICES, INC.					3 90123 011 ***150.00
Principal Place 14000 SW 1 SUITE 207 MIAMI, FL 3	19TH AVENUE	Mailing Address 14000 SW 119TH AVEN SUITE 207 MIAMI, FL 33186 US		4000000	1211  1814  11514 211  211  211  21  21  21  21  21  21
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	Le Box 77-629		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04222008 Chg-P	CR2E034 (12/06)
City & State	Đ	MidMi Flor	rida	4. FEI Number 37-1484076	Applied For Not Applicable
Zip	Country	33177-0250	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New	Registered Agent
GARCIA-LINARES, MANUEL A ESQUIRE 201 S. BISCAYNE BOULEVARD SUITE 1000 MIAMI, FL 33131			Name M	chael J. Ca5a (P.O. Box Number is Not Accepta	le
			1.44	000 BW 119th f	tue
			City	ami	FL 33986
	named entity submits this statement for ions of registered agent.	the purpose of changing its r			Florida. I am familiar with, and accept
SIGNATURE	Michael J. Casa	le 7/	Registered Agent Agnatura requir	anle	4/22/08
	Signature, typed or printed name of registered agent a  E NOWIII FEE IS \$150.00	9. Election Campaig	n Financing \$	5.00 May Be	DATE
10.	ay 1, 2008 Fee will be \$550.0 OFFICERS AND I		T 11.		EFICEDS AND DIRECTORS IN 11
	DCEO	· · · · · · · · · · · · · · · · · · ·	<del></del>		FFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	MILLOR, MANUEL J 14000 SW 119TH AVENUE, SUIT MIAMI, FL 33186	□ Delete E 207	STREET ADDRESS	whia J. Starrett 200 6W 11947 ave Si 41 a mi Fl 33186	□ Change
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STREET ADDRESS	1				
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	MIAMI, FL 33186		STREET ADDRESS 140	000 5W494 Ave 1911 16 33 186	Suite 207
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12. I hereby certify that the information supplied with this filling 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:

#23-08

305-234-1771

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR