## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000028843

Entity Name: EL AREPAZO INC

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	INE ISLAND RC	)		
#D CAPE CO	RAL, FL 33909	)		
Current Mailing Address:		New Mailing Address:		
954 NE PI #D	INE ISLAND RC	)		
	RAL, FL 33909	)		
FEI Number	r: 20-0724873	FEI Number Applied For ( )	FEI Number Not Applical	ole ( ) Certificate of Status Desired ( )
Name and	d Address of C	urrent Registered Agent:	Name and Ad	Idress of New Registered Agent:
1721 SE 1	S, CARLOS 13TH TERRACE DRAL, FL 33990			
The above				
	e named entity s te of Florida.	submits this statement for the p	purpose of changing its r	egistered office or registered agent, or both,
n the Stat	te of Florida.	submits this statement for the	ourpose of changing its r	egistered office or registered agent, or both,
n the Stat	te of Florida.	submits this statement for the place is statemen		egistered office or registered agent, or both,  Date
in the Stat	te of Florida.  IRE: Electron			
in the Stat SIGNATU Election Ca	te of Florida.  IRE: Electron	ic Signature of Registered Ag	ent	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address:	te of Florida.  IRE: Electron  Impaign Financing  IS AND DIRECTOR  VP ()  MOLINOS, ANA 954 NE PINE IS	ic Signature of Registered Ag  Trust Fund Contribution ( ).  TORS:  Delete  LAND RD #D	ent	Date
in the Stat SIGNATU Election Ca	te of Florida.  IRE:  Electron  Impaign Financing  IS AND DIREC  VP ()  MOLINOS, ANA 954 NE PINE IS  CAPE CORAL, I  P ()  PARRA, HERMA 1324 SW 25TH	ic Signature of Registered Ag  Trust Fund Contribution ( ).  TORS:  Delete  LAND RD #D  FL 33990  Delete  AGORAS  STREET	ADDITIONS/O Title: Name: Address: City-St-Zip: Title: Name: P, Address: 96	Date  CHANGES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

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: HERMAGORAS PARRA P 04/17/2008