

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058460

FILED  
Aug 15, 2007  
Secretary of State

**Entity Name:** FERNANDO ARDAY SPECIAL EVENTS, CORP.

**Current Principal Place of Business:**

7250 NW 41 ST  
UNIT A  
MIAMI, FL 33166

**New Principal Place of Business:**

11955 SW BIRD DR  
MIAMI, FL 33175

**Current Mailing Address:**

11955 SW BIRD DR.  
MIAMI, FL 33175

**New Mailing Address:**

**FEI Number:** 20-0918757      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ANIA MORALES & ASSOCIATES  
15354 SW 41ST TERR.  
MIAMI, FL 33185      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARDAY, FERNANDO  
Address: 11955 SW BIRD DR.  
City-St-Zip: MIAMI, FL 33175

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

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: FERNANDO ARDAY

D

08/15/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date