

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075001

FILED
May 14, 2007
Secretary of State

Entity Name: BRAMA INSTALLATION INC.

Current Principal Place of Business:

815 HARBOR INN DR
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

7912 SONOMA SPRINGS CIRCLE
#106
LAKE WORTH, FL 33463 US

Current Mailing Address:

815 HARBOR INN DR
CORAL SPRINGS, FL 33071 US

New Mailing Address:

7912 SONOMA SPRINGS CIRCLE
#106
LAKE WORTH, FL 33463 US

FEI Number: 54-2153009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRACAMONTE, CRISTIAN H MR.
815 HARBOR INN DR
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

BRACAMONTE, CRISTIAN H MR.
7912 SONOMA SPRINGS CIRCLE
#106
LAKE WORTH, FL 33463 US

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:

05/14/2007

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: PD () Delete
Name: BRACAMONTE, CRISTIAN
Address: 815 HARBOR INN DR
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: S (X) Delete
Name: LEONEL, THIAGO
Address: 815 HARBOR INN DR
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: V () Delete
Name: MAIO, KARINA
Address: 815 HARBOR INN DR
City-St-Zip: CORAL SPRINGS, FL 33071 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRACAMONTE, CRISTIAN
Address: 7912 SONOMA SPRINGS CIRCLE
City-St-Zip: LAKE WORTH, FL 33463 US

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

Title: V (X) Change () Addition
Name: MAIO, KARINA
Address: 7912 SONOMA SPRINGS CIRCLE
City-St-Zip: LAKE WORTH, FL 33463 US

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: CRISTIAN BRACAMONTE

PD

05/14/2007

Electronic Signature of Signing Officer or Director

Date