2007 FOR PROFIT CORPORATION

FILED Anr 18. 2007 08:00 AM

ANNUAL REPURI					Apr 10, 2007 00.00				
1. Entity Nam	MENT # P040000796	35					Secre	etary of State	
Principal Plac 19111 STER MIAMI, FL 3		Mailing Address 19111 STERLING DR MIAMI, FL 33157			 115 8 11 11	1784 1111 2011 1784		HINA BROA MINA SIINASKII JAAK	
DO NOT WRITE IN THIS SPA				-	04142007 No Chg-P CR2E034 (11/05) 4. FEI Number				
	6. Name and Address of Current Re	pistered Agent	{						
VERDECIA, FRANCISCO 19111 STERLING DR MIAMI, FL 33157			DO NOT WRITE IN THIS SPACE						
	named entity submits this statement for th tions of registered agent	e purpose of changing its register	ed office or re	egistered	dagent, or bo	oth, in the State of F	Florida, I ar	n familiar with, and accept	
Signature, typed or printed name of registered agent and title & applicable (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			ncing	\$5.0 Added	0 May Be I to Fees				
10.	OFFICERS AND DIF	ECTORS	I			•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERDECIA, FRANCISCO 19111 STERLING DR MIAMI, FL 33157							·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT W	VŖIT	E	
TITLE NAME STREET ADDRESS CITY - ST - ZIP					IN .	THIS S	PAC	E	

12. I hereby certify that the information supplied with this filing 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.

LACSIDENT

TITLE NAME

STREET ADDRESS CITY - ST- ZIP TITLE

STREET ADDRESS CITY-SI-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

U00000714297 04/27/07-80018-010 150.00