

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90110 012 ***150.00

DOCUMENT # P04000085811

1. Entity Name
SAN JUDAS TADEO PROPERTY CORPORATION



Principal Place of Business Mailing Address
5901 SW 74TH ST #400 **5901 SW 74TH ST #400**
S MIAMI, FL 33143 **S MIAMI, FL 33143**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
9400 S Dadeland Blvd. **9400 S Dadeland Blvd.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 601 **Suite 601**

City & State City & State
Miami, FL **Miami, FL**

Zip Country Zip Country
33156 **USA** **33156** **USA**



01312008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
20-1222032 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOLANS, JAMES A
5901 SW 74TH ST #400
S MIAMI, FL 33143

7. Name and Address of New Registered Agent

Name: **ROBERT TARABOULOS**
 Street Address (P.O. Box Number is Not Acceptable): **9400 South Dadeland Blvd., Suite 601**
 City: **Miami** State: **FL** Zip Code: **33156**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Robert Taraboulos* **ROBERT TARABOULOS** DATE: **4/10/08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	RODRIGUEZ, DAVID	
STREET ADDRESS	5901 SW 74TH ST #400	
CITY-ST-ZIP	S MIAMI, FL 33143	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PENA, ADRIANA	
STREET ADDRESS	5901 SW 74TH ST #400	
CITY-ST-ZIP	S MIAMI, FL 33143	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MOLANS, JAMES A	
STREET ADDRESS	5901 SW 74TH ST #400	
CITY-ST-ZIP	S MIAMI, FL 33143	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rodriguez, David	
STREET ADDRESS	9400 South Dadeland Blvd., Suite 601	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pena, Adriana	
STREET ADDRESS	9400 South Dadeland Blvd., Suite 601	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Taraboulos, Robert	
STREET ADDRESS	9400 South Dadeland Blvd., Suite 601	
CITY-ST-ZIP	Miami, FL 33156	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 information.

SIGNATURE: *Robert Taraboulos* DATE: **4/20/08** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR