

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90016 001 ***158.75



DOCUMENT # P04000110108
 1. Entity Name
MENDOZA PADRON INVESTMENTS, INC.

Principal Place of Business
 275 NW33TH AVENUE
 MIAMI, FL 33125

Mailing Address
 275 NW33TH AVENUE
 MIAMI, FL 33125

40011000



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

04162008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent
 PADRON, FRANCISCO E
 275 NW 33RD AVENUE
 MIAMI, FL 33125

4. FEI Number
 73-1713640

Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
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	PADRON, FRANCISCO E	
STREET ADDRESS	275 NW 33RD AVENUE	
CITY-ST-ZIP	MIAMI, FL 33125	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MENDOZA, NERY	
STREET ADDRESS	275 NW 33RD AVENUE	
CITY-ST-ZIP	MIAMI, FL 33125	
TITLE	S	<input type="checkbox"/> Delete
NAME	PADRON, MERCEDES A	
STREET ADDRESS	275 NW 33RD AVENUE	
CITY-ST-ZIP	MIAMI, FL 33125	
TITLE	T	<input type="checkbox"/> Delete
NAME	RIJOS PADRON, LUIS A	
STREET ADDRESS	275 NW 33RD AVENUE	
CITY-ST-ZIP	MIAMI, FL 33125	
TITLE	T	<input type="checkbox"/> Delete
NAME	RIJOS PADRON, EDUARDO E	
STREET ADDRESS	275 NW 33RD AVENUE	
CITY-ST-ZIP	MIAMI, FL 33125	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
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 empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/22/08 (305) 223-2670
 Daytime Phone #