2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2007 8:00 am

			1/21 41/1		- Secretary of State	
DO	OCU	VENT # P0500000	01-31-2007 90041 035 ***158.75			
1	ntity Name					
- -STI	RATEC	GIG-IMPORTERS-INC:			3	
					7	
1						
Princ	cipal Place	of Business	Mailing Address			
	•		•	CDIVID	10001	
	7 <u>0 Camino gardens bl</u> vd. 37 <u>0 Camino gardens bl</u> Jite 300 Slite 300			D DLAD.		
		FL 33432	BOCA RATON, FL 334	32		
	A 1411 OIL					
2. P	Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address			
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- _	uite, Apt.	# etc	Suite, Apt. #, etc.		OF D	
		.,			01092007 Chg-P CR2E034 (12/06)	
1	ity & State		City & State		4. FEI Number - Applied For	
~),, o o.a	•	0.1, 0.010.0		20-2099607 Not Applicable	
7	²ip	Country	Zip	_Country _	£9.75	
-	-'P				5. Certificate of Status Desired Fee Required	
		6, Name and Address of Current	t Registered Agent	.1	7. Name and Address of New Registered Agent	
		-, regerro with reservant or our less		Name -		
ിരവ	MEZ G	ERMAN		Terr	ARI Alejandro	
		O GARDENS BLVD		Street Addres	ss (P.O. Box Number is Not Acceptable)	
	ITE 300			103	co 1118 Court South	
₿О	CA RAT	ON, FL 33432				
				City	Zip Code	
				City Boc	e Raton FL 33498	
	The above	named entity submits this statement f	for the purpose of changing it	s registered office or regis	stered agent, or both, in the State of Florida, I am familiar with, and accept	
		ons of registered agent				
SIGNATURE Signature, typed or plated name of eigetered agent and titls if applicable (NOTE Registered Agent signature required when reinstating)						
					mad what reportshood	
<u> </u>	_	Signature, typed of pyrited trains of legisleted ager	e and min supplication (140	IE negistered Agent agrantie tech	uned when removing)	
_ Í				atau Caranatan		
Ι		E NOW!! FEE IS \$150.00	9. Election Campa nn Trust Fund Cor		\$5.00 May Be Added to Fees	
<i> </i>	After Ma	ıy 1, 2007 Fee will be \$550	.00	illibation. — A	naded to rees	
10.		OFFICERS ANI	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
THILE	:	D	☐ Delete	TITLE JA	DIEUS TURN FOLIA Change Addition	
NAME		-FERRARI, ALEJANDRO		NAME-	71-03/ 1000	
1	ET ADDRESS	10300 178TH COURT SOUTH	1	SIBEET ADORESS / 5	550 Brickell AV Apt 304B	
- 1	- S1- ZIP	BOCA RATON, FL 33498		CITY-ST-ZIP M	(comi FC, 33/29	
-		D			☐ Change ☐ Addition	
TOTLE		BAUTISTA, JUAN	☐ Delete	TITLE NAME	☐ Change ☐ Addition	
NAME		LA FUENTE 8A		STREET ADDRESS		
	et address - St-Zip			CITY-SI-ZIP		
_		ALMENDRALEJO, OC 06200				
TITLE		D	Delete	TITLE	☐ Change ☐ Addition	
NAME		GOMEZ, GERMAN		NAME		
	ET ADDRESS.	-370 CAMINO GARDENS BLVD	··# 300	- SIRECT ADDRESS	-	
CITY	- ST-ZIP	BOCA RATON, FL 33432		CITY+ST-ZiP		
TITLE			Delete		Change	
MAM		·		NAME		
	ET ADDRESS			STREET ADDRESS		
CITY.	-\$1-ZIP	 	•	CITY+\$1-ZIP		
TETLE			☐ Delete	TITLE	☐ Change ☐ Addition	
NAMI			Detele	- NAME		
	ET ADDRESS			STREET ADDRESS		
l	- \$1- ZiP			CITY-S1-ZIP		
			77		Change D Addition	
TITLE			□ Delete	TITLE	Change Addition	
NAM				- NAME		
	ET ADDRESS			STREET ADORESS		
	- S1- ZIP			CITY-ST-ZIP		
12.	Thereby	certify that the information supplied w	ith this filing does not qualify	for the exemptions conta	ined in Chapter 119, Florida Statutes. I further certify that the information	
	of the co	rooration or the receiver or trustee em	powered to execute this repo	rt as required by Chapter	the same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if	
-	_changed	or on an attachment with an address	s, with all other like empowere	d		
		(/)/ 7		Directon	Ton/29/07 (561)3053456	
SI	IGNAT	'URE: <i>いいい</i> ん	- from -	<u> </u>	J/2//	
-\- 		SIGNÁTURE AND TYPED OF	R PRINTED NAME OF SIGNING OFFICE	R OR DIRECTOR	Date Daylinie Phone *	