2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 08:00 A
Secretary of State

Applied For

Not Applicable

| ANNUAL REPORT | | | | | |
|---|-----------------------|--|--|--|--|
| DOCUMENT # P05000025754 1. Entity Name CELESTIAL LITERARY SVCES., INC. | | | | | |
| Principal Place of Business | Mailing Address | | | | |
| 7360 CORAL WAY STE 21 | 7360 CORAL WAY STE 21 | | | | |
| MIAMI, FL 33155 | MIAMI, FL 33155 | | | | |



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03132007 No Chg-P CR2E034 (11/05)

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

CORONADO, NESTOR 7360 CORAL WAY STE 21 MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2364367

| | named entity submits this statement for the pions of registered agent. | ourpose of changing its registere | d affice or r | egistered agent, or bo | oth, in the State of Florida I am familiar with, and accept |
|--|---|--|-------------------|--------------------------------|--|
| SIGNATURE_ | One of registered agent. Signature, typed or printed name of registered agent and title. | d applicable (AIOUE) Recolored | Agent of positive | required when reinstating) | DAIF |
| | Signature, typed or printed rights of registers agent and title | _ | | Liednicen with industring | DATE |
| FIL After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Finance Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | |
| ·30. | OFFICERS AND DIREC | CTORS | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | DPS CORONADO, NESTOR 7360 CORAL WAY STE 21 MIAMI, FL 33155 | , | | | |
| OTLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | U00000675825 03/30/07-80032-004 150.00 |
| TITLE NAME STREET ADDRESS CITY+ST+ZIP | | | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-SE-ZIP | | | | IN . | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| indicated of the cor | on this report or supplemental report is true a | and accurate and that my signatu | ire shall hav | ve the same legal effec | 9. Florida Statules. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if |

NTED NAME OF SIGNING OFFICER OR DIRECTOR