## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 25, 2008 08:00 AN Secretary of State

ANIVAL NELONI				Secretary of St			
DOCU  1. Entity Nam  MANICO		791			5	ceretary or s	<b>J</b> t
Principal Plac	ce of Business	Mailing Address					
11512 LAKE		11512 LAKEVIEW DRIVE					
CORAL SPRII	NGS, FL 33071	CORAL SPRINGS, FL 33071					
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			History.				ýy
	e named entity submits this statement for t tions of registered agent.	he purpose of changing its registe	ered office or register	ed agent, or bot	h, in the State of Florid	da. I am familiar with, and acco	<u>:</u> ept
SIGNATURE.	Signature, typed or printed name of registered agont and	ditte t applicable. (NOTE: Registe	ered Agent signature required	when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 No. 2008 Fee will be \$550.00	S. Election Campaign Fin     Trust Fund Contribution		00 May Be	03/05/08-3	338343 30026-022 150.00	
10.	OFFICERS AND D	IRECTORS	ar veloù minori	vinski maliyii a .			· .
TITLE NAME	P NIETO, GILBERTO						3
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CITY-ST-ZIP	CORAL SPRINGS, FL 33071	<u> </u>					, ". 1.
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CITY-ST-ZIP				mercian military	and the second of the second	and the second control of the second of	

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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-08 Date

Deytime Phone #