2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054104

Entity Name: AKERO HOLDINGS, INC.

City-St-Zip: CORAL GABLES, FL 33134

FILED May 02, 2008 Secretary of State

| Entity Nai | me: AKEROI | HOLDINGS, INC. | | | |
|---|-------------------------------|--|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| | BLAS RD, PEN ABLES, FL 33 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | BLAS RD, PEN ABLES, FL 33 | | | | |
| FEI Number: 20-2657548 FEI Number App | | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| C/O FRAN 150 W FLA | | LLER WEISSLER,ALHADEF & NENDEZ, ESQ. 'E 2200 | S | | |
| | named entity e of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| | | 3(2)(b), F.S., the corporation did no | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | MAS, JUAN CA | RD, PENTHOUSE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MAS, JORGE |) Delete RD, PENTHOUSE ES, FL 33134 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | MAS, JOSE R |) Delete | Title: Name: Address: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOSE MAS DIR 05/02/2008