2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000057804

Entity Name: POWERDREAMS INVESTMENT CORP

FILED Feb 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

90 ALTON RD 335 S. BISCAYNE BLVD 1809

2112

MIAMI BEACH, FL 33139 US MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

335 S. BISCAYNE BLVD 90 ALTON RD 1809

MIAMI BEACH, FL 33139 US MIAMI, FL 33131 US

FEI Number: 20-3254688 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANZAFAME, ALFIO LANZAFAME, ALFIO 90 ALTON RD. 335 S. BISCAYNE BLVD 1809 MIAMI BEACH, FL 33139 US MIAMI, FL 33131 US

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.

SIGNATURE: ALFIO LANZAFAME 02/21/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LANZAFAME, ALFIO LANZAFAME, ALFIO Name: Name: 90 ALTON RD. 2112 335 S. BISCAYNE BLVD #1809 Address: Address:

City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: MIAMI, FL 33131 US

() Delete Title: VΡ Title: VΡ (X) Change () Addition Name: LANZAFAME, GIAN P Name: LANZAFAME, GIAN P

90 ALTON RD. 2112 335 S. BISCAYNE BLVD #1809 Address: Address:

MIAMI BEACH, FL 33139 US MIAMI, FL 33131 US City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

LANZAFAME, MORELA E Name: LANZAFAME, MORELA E Name: 90 ALTON RD. 2112 335 S. BISCAYNE BLVD# 1809 Address: Address:

City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: ALFIO LANZAFAME 02/21/2007