## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 24, 2008 08:00 AN Secretary of State

| ANNUAL REPORT   |                                    |   |  |   |             |                            |  | Secretary of State                    |   |                           |                                 |  |
|---|------------------------------------|---|--|---|-------------|----------------------------|--|---------------------------------------|---|---------------------------|---------------------------------|--|
| DOCUMENT # P05000062374  1. Entity Name REGIS CATHEDRAL CORPORATION |                                    |   |  |   |             |                            |  | 5                                     | secreta                                 | ry (                      | ot State                        |  |
| Principal Plan  | ce of Busines                      |   | ······································ | Apilios Address   |             |                            | ┥ 、  |                                       |   |                           |                                 |  |
| Principal Place of Business 17610 NW 76 CT HIALEAH, FL 33015        |                                    |   |  | Mailing Address<br>17610 NW 76 CT<br>HIALEAH, FL 33015  |             |                            |  |                                       |   |                           |                                 |  |
| Ì   |                                    |   |  |   |             |                            | 4 (4 8 ) (4 4 6 6                                | iel egli eelii eelik eeli             | I <b>63111 9</b> 111 <b>1 4311</b> 1114 |                           | 1 <b>00</b> 1 11 1 <b>1 1</b> 5 |  |
| 2. Principal Place of Business - No P.O. Box #                      |                                    |   |  | 3. Mailing Address  |             |                            |  |                                       |   |                           |                                 |  |
| Suite, Apt. #, etc.   |                                    |   |  | Suite, Apt. #, etc.   |             |                            | 04282008   | Chg-P                                 | CR2E034 (1                              | 2/06)                     |                                 |  |
| City & State  |                                    |   |  | City & State  |             | 4. FEI Number 20-2748      | 175  |                                       |   | plied For<br>t Applicable |                                 |  |
| Ζιρ   |                                    | Country                                   |  | Zip   | Cour        | ntry                       | 5. Certificate of                                | Status Desired                        |   | 5 Add                     |                                 |  |
| 6. Name and Address of Current Registered Agent                     |                                    |   |  |   |             |                            | 7. Name and A                                    | dress of New R                        |   |                           |                                 |  |
| DADEDES   | S DENDO                            |   |  |   |             | Name                       |  |                                       |   |                           |                                 |  |
| PAREDES, PEDRO<br>9221 CRESCENT DRIVE<br>MIRAMAR, FL 33025          |                                    |   |  |   |             | Street Address (           | reet Address (P.O. Box Number is Not Acceptable) |                                       |   |                           |                                 |  |
|   |                                    |   |  |   |             |                            |  |                                       |   |                           |                                 |  |
|   |                                    |   |  |   |             | City                       |  |                                       | rL                                      | p Code                    |                                 |  |
| 8. The above the obligation   | e named entity<br>itions of regist | y submits this state<br>ered agent.       | ment for the                           | purpose of changing its   | register    | ed office or register      | red agent, or both,                              | in the State of Flo                   | rida. I am familia                      | r with, a                 | and accept                      |  |
| SIGNATURE.  | KIS                                | eas                                       | 2                                      |   |             |                            |  |                                       | 4-28-6                                  | 2                         |                                 |  |
|   | Signature, typed                   | or printed name of register               | ed agent and tale                      | d applicable, (NOTI   | E Registere | d Agent signature required | d when reinstating)                              |                                       | DATE                                    | , ,                       | <del></del>                     |  |
|   |                                    | FEE IS \$150.0<br>3 Fee will be \$        |  | 9. Election Campa<br>Trust Fund Cont  |             |                            | .00 May Be<br>led to Fees                        | U00000<br>-05/14/08                   | 920044<br>80029-003                     | 3 150                     | 3.00                            |  |
| 10.   |                                    | OFFICER                                   | S AND DIRE                             | CTORS   | 11.         | ·                          |  | ANGES TO OFFI                         |   |                           |                                 |  |
| TITLE   | Р                                  |   |  | ☐ Delete  | TITU        |                            |  | - <u> </u>                            | □ c                                     | hange                     | Addition                        |  |
| NAME<br>STREET ADDRESS  | 17610 NW                           | IEZ, REGIS                                |  |   | NAM         | E<br>E1 ADDRESS            |  |                                       |   |                           | }                               |  |
| CITY-ST-ZIP   | HIALEAH, FL 33015                  |   |  |   |             | -ST-ZIP                    |  |                                       |   |                           |                                 |  |
| TITLE   | TR                                 |   |  | ☐ Delete  | TITLE       |                            |  |                                       |   | ange                      | Addition                        |  |
| NAME  | RODRIGUEZ, REGIS                   |   |  |   | NAM         |                            |  |                                       |   |                           |                                 |  |
| STREET ADDRESS<br>CITY-ST-ZIP                                       | 17610 NV<br>HIALEAH.               | FL 33015                                  |  |   |             | E1 ADDRESS<br>-ST-Z)P      |  |                                       |   |                           |                                 |  |
| TITLE   |                                    |   | <del></del>                            | ☐ Delete  | TITLE       |                            |  | <u></u>                               |   | nange                     | Addition .                      |  |
| NAME  |                                    |   |  |   | NAM         | E                          |  |                                       |   |                           |                                 |  |
| STREET ADDRESS<br>CITY-ST-ZIP                                       |                                    |   |  |   |             | ET ADDRESS<br>- ST-ZIP     |  |                                       |   |                           |                                 |  |
| TITLE   |                                    |   |  | ☐ Delete  | TITLE       |                            |  |                                       | □ Cr                                    | anne                      | Addition                        |  |
| NAME  |                                    |   |  | Delete  | NAME        |                            |  |                                       |   | ingo                      | Addition                        |  |
| STREET ADDRESS  |                                    |   |  |   |             | ET ADDRESS                 |  |                                       |   |                           |                                 |  |
| CITY-ST-ZIP   | <u> </u>                           |   |  |   | _           | ST-ZIP                     |  | · · · · · · · · · · · · · · · · · · · |   |                           | - I Add Con                     |  |
| TITLE<br>NAME   |                                    |   |  | ☐ Delete  | TITLE       |                            |  |                                       | □ CF                                    | ange                      | Addition                        |  |
| STREET ADDRESS  |                                    |   |  |   | STRE        | ET ADDRESS                 |  |                                       |   |                           |                                 |  |
| CITY-ST-ZIP   |                                    |   | ·—                                     |   | CITY        | ST-ZiP                     |  |                                       |   |                           |                                 |  |
| TITLE<br>NAME   |                                    |   |  | Delete  | TITLE       |                            |  |                                       |   | ange                      | Addition                        |  |
| STREET ADDRESS  |                                    |   |  |   |             | T ADDRESS                  |  |                                       |   |                           |                                 |  |
| CITY-ST-ZIP   |                                    |   |  | ·- <u></u>  | City-       | ST-ZIP                     |  |                                       |   |                           |                                 |  |
| indicated<br>of the corp  | on this report<br>poration or the  | or supplemental re<br>receiver or trustee | port is true a<br>empowered            | ling does not qualify for<br>and accurate and that m<br>d to execute this report a<br>other like empowered. | y signat    | ure shall have the s       | same legal effect as                             | if made under oa                      | ath, lhat I am an c                     | officer o                 | r director                      |  |
|   | ×                                  |   |  |   |             |                            |  | 4-78- 2                               | b                                       |                           |                                 |  |
| SIGNATURE: 4-28-08  SIGNATURE: Dayland Phone # Dayland Phone #      |                                    |   |  |   |             |                            |  |                                       |   |                           | ——                              |  |