2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068713

City-St-Zip:

CHUAO, CARACAS, . VENEZUELA

Entity Name: NORTH MIAMI 608, CORP.

FILED Apr 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15045 BISCAYNE BLVD NORTH MIAMI, FL 33181 **Current Mailing Address: New Mailing Address:** 5805 BLUE LAGOON SERVICES, LLC 300 SEVILLA AVENUE 200 CORAL GABLES, FL 33134 MIAMI, FL 33126 FEI Number: 98-0489581 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: AG CORPORATE SERVICES, LLC AG CORPORATE SERVICES, LLC 300 SEVILLA AVENUE 5805 BLUE LAGOON DRIVE 201 200 CORAL GABLES, FL 33134 US MIAMI, FL 33126 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: AG CORPORATE SERVICES,LLC 04/19/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MOREAN, ARTURO Name: Name: CALLE VERACRUZ TORRE ABA PISO 10 OFI 10-01 Address: Address: City-St-Zip: LAS MERCEDES, CARACAS, . VENEZUELA City-St-Zip: VΡ Title: Title: () Delete () Change () Addition Name: AREVALO, CARLOS Name: AV. ESTANCIA CCCT TORRE B PISO 11 OF 1107 Address: Address: CHUAO, CARACAS, . VENEZUELA . City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition AREVALO, HENRIQUE Name: Name: AV. ESTANCIA CCCT TORRE B PISO 11 OF 1107 Address: Address

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.

City-St-Zip:

Ρ SIGNATURE: ARTURO MOREAN 04/19/2007