2008 FOR PROFIT CORPORATION

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ANNUAL REPORT						
DOCUMENT # P05000070009 1. Entity Name NIMITEK, INC.			Ju	FILED d 31, 2008 08:00 AM Secretary of State		
•	e of Business 49TH AVENUE 3196	Mailing Address 13605 SW 149TH AVENUE UNIT 5 MIAMI, FL 33196			·	
DO NOT WRITE IN THIS SPACE			CE	07282008 No Chg-P CR2E034 (11/05) 4. FEI Number		
6. Name and Address of Current Registered Agent PERAZA, PEDRO C 13605 SW 149TH AVENUE UNIT 5 MIAMI, FL 33196					NOT WRITE THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE-Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be ed to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DE D PERAZA, PEDRO C 15680 SW 150TH AVE MIAMI, FL 33187	RECTORS			U00000956721 07/31/08-80001-013 158.75	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
NAME STRÉET ADDRESS						

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 path; 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 bither like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MARKE OF SIGNING OFFICER OR DIRECTOR

Date Dayline Phone # SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR