FILED Feb 04, 2008 8:00 am Secretary of State

2008	FOR PROFIT	「CORPORA	ATION
	ANNUAL	REPORT	

SIGNATURE:

DOCUMENT # P05000070340 02-04-2008 90056 041 ***150.00 VIDAL INVESTMENTS, INC. Principal Place of Business Mailing Address 2351 W FLAGLER ST 2351 W FLAGLER ST MIAMI, FL 33135 MIAMI, FL 33135 2. Principal Place of Business - No P.O. Box # 2047 5W # 38 COURT 3. Mailing Address 3047 SW LOVET Suite, Apt. #, etc. Suite, Apt. #, etc. 01042008 Chg-P CR2E034 (12/06) City & State Applied For City & State 4. FEI Number MIAMI MIAM 20-2856316 Not Applicable Country V & A Country USA -\$8:75-Additional-5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VIDAL, SERGIO GARCIA-LINARES, MANUEL A ESQ MIAMI CTR 10TH FL 201 S BISCAYNE BLVD MIAMI, FL 33131 City MIAMI 8. The above named entity submits this statement to the drives of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent SERGIOC.VIDAL SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VIAL SERGIO C. TITLE ☐ Delete TITLE ☐ Addition VIDAL, SERGIO C NAME NAME STREET ADDRESS 2351 W FLAGLER ST STREET ADDRESS MIAMI, FL 33135 CITY-ST-ZIP CITY-ST-ZIP MIAMI FLA 33140 TITLE ☐ Delete TITLE ☐ Addition VIDAL, SILVIA C. NAME VIDAL, SILVIA C NAME 3047 S.W. 38 COURT STREET ADDRESS 2351 W FLAGLER ST STREET ADDRESS MIAMI FL 33146 CITY-ST-ZIP MIAMI. FL 33135 CITY-ST-ZIP VP TITLE ☐ Delete TITLE ☐ Addition MDAL, CHRISTOPHER M 3047 S.W. 38 COURT VIDAL, CHRISTOPHER M NAME NAME STREET ADDRESS 2351 W FLAGLER ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33135 MIAMI FL CITY-ST-2IP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this profiles 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,