

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077855

Entity Name: ZAPHIRA, INC.

FILED  
Mar 21, 2007  
Secretary of State

## Current Principal Place of Business:

3201 NE 183RD STREET #2708  
AVENTURA, FL 33160

## New Principal Place of Business:

3201 NE 183RD STREET  
2708  
AVENTURA, FL 33160 US

## Current Mailing Address:

3201 NE 183RD STREET #2708  
AVENTURA, FL 33160

## New Mailing Address:

3201 NE 183RD STREET  
2708  
AVENTURA, FL 33160 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRATS-NICASTRO, MONICA  
3201 NE 183RD STREET  
APT. 2708  
AVENTURA, FL 33160 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ROSELLINI, PAOLO  
Address: RUA APERANA 22/402 LEBLON  
City-St-Zip: BRASIL,

Title: D ( ) Delete  
Name: MAES, ELIANA  
Address: RUA APERANA 22/402 LEBLON  
City-St-Zip: BRASIL,

Title: SD ( ) Delete  
Name: PRATS-NICASTRO, MONICA  
Address: 3201 NE 183RD STREET #2708  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ROSELLINI, PAOLO  
Address: CLL 94 # 7A-40 APTO 402  
City-St-Zip: BOGOTA, CD 00000 CO

Title: D (X) Change ( ) Addition  
Name: MAES, ELIANA  
Address: CLL 94 # 7A-40 APTO 402  
City-St-Zip: BOGOTA, CD 00000 CO

Title: SD (X) Change ( ) Addition  
Name: PRATS-NICASTRO, MONICA  
Address: 3201 NE 183RD STREET #2708  
City-St-Zip: AVENTURA, FL 33160 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.

SIGNATURE: PRATS-NICASTRO, MONICA

SD

03/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date