## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 31, 2008 08:00 AN **DOCUMENT # P05000092380** Secretary of State 1. Entity Name ALEJANDRO VILARELLO, PA. Principal Place of Business Mailing Address 5521 HAWKES BLUFF AVE. 5521 HAWKES BLUFF AVE. **DAVIE. FL 33331** DAVIE, FL 33331 No Chg-P CR2E034 (11/05) 01252008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3092567 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VILARELLO, ALEJANDRO DO NOT WRITE 5521 HAWKES BLUFF AVE. **DAVIE, FL 33331** IN 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 aigneture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE'IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. n TITLE VILARELLO, ALEJANDRO NAME 5521 HAWKES BLUFF AVE. STREET ADDRESS CITY-ST-ZIP **DAVIE, FL 33331** $\bigcirc$ TITLE NAME STREET ADDRESS U000000808952 CITY-ST-ZIP 02/08/08-80002-025 150:00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 trusted 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 accurage, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADORESS CITY-ST-7/P

FFICER OR DIRECTOR