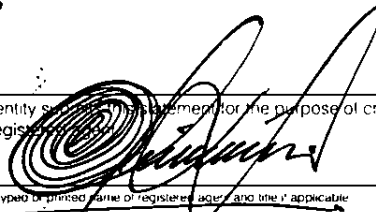
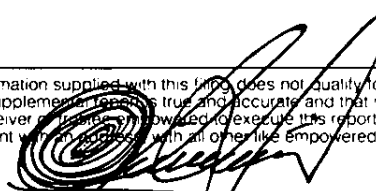


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90824 005 ***150.00

DOCUMENT # P05000108735 1. Entity Name SANTA MARTA BUILDING, INC.					
Principal Place of Business 8070 NW 66 STREET MIAMI, FL 33166			Mailing Address 8070 NW 66 STREET MIAMI, FL 33166		
2. Principal Place of Business - No P.O. Box # 6700 NW 77 CT		3. Mailing Address 6700 NW 77 CT			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State MIAMI, FL		City & State MIAMI, FL		4. FEI Number 20-3661332	
Zip 33166		Country 		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MOLINA, CESAR E 8070 NW 66 STREET MIAMI, FL 33166			7. Name and Address of New Registered Agent Name MOLINA, CESAR E. Street Address (P.O. Box Number is Not Acceptable) 6700 NW 77 CT City MIAMI FL 33166		
8. The above named entity is hereby authorized 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  CESAR E. MOLINA 4/24/07 Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature is required when re-registering) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT MOLINA, CESAR E 8070 NW 66 STREET MIAMI, FL 33166	☐ Delete ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LLINAS MOLINA, ELSEMARIE 8070 NW 66 STREET MIAMI, FL 33166	☐ Delete ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
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 reports 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 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 other like empowered					
SIGNATURE: 		CESAR E. MOLINA (305) 7150057 DIRECTOR 4/24/2007			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			