
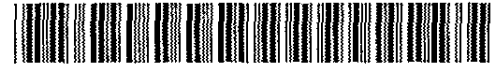


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000111840	
1. Entity Name PRIMOS DEVELOPMENT I, INC.	

Principal Place of Business C/O ROBERT CLEMENT 1226 N ELLIOTT PARK RIDGE, IL 60068	Mailing Address C/O ROBERT CLEMENT 1226 N ELLIOTT PARK RIDGE, IL 60068
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01062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3725775	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MESA, IDANIA 12512 SW 73RD TER MIAMI, FL 33183

**DO NOT WRITE
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 IDANIA R. MESA U000000581900
01/11/07-80010-000-150.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	O CLEMENT, ROBERT 1226 N ELLIOTT PARK RIDGE, IL 60068
TITLE NAME STREET ADDRESS CITY - ST - ZIP	O MESA, IDANIA R 12512 SW 73RD TER MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OD MESA, ALBERTO B 12512 SW 73RD TER MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OD CLEMENT, BARBARA 1226 N ELLIOTT PARK RIDGE, IL 60068
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/07 847 827-8630
Date Daytime Phone #