## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

**SIGNATURE** 

## Apr 13, 2007 08:00 AM Secretary of State **DOCUMENT # P05000116755** 1. Entity Name SUMÓRADA, INC. Principal Place of Business Mailing Address 6390 GULF BLVD 6390 GULF BLVD ST PETERSBURG BCH, FL 33706 ST PETERSBURG BCH, FL 33706 No Chg-P CR2E034 (11/05) 04062007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2307808 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BEERS, ERIC DO NOT WRITE 7036 S SHORE DR S PASADENA, FL 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 signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE D BEERS, ERIC E NAME STREET ADDRESS 7036 S SHORE DR S CITY-ST-ZIP PASADENA, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITI F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 actures, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**