2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 08:00 A Secretary of State

ANNUAL REPORT		Secretary of S	
DOCUMENT # P05000147702 1. Enlity Name FREDA GARBER, P.A.		Secretary (
Principal Place of Business Mailing Address 1627 BRICKELL AVENUE 1627 BRICKELL AVENUE #2904 MIAMI, FL 33129 MIAMI, FL 33129			
		04122008 No Chg-P CR2E034 (11/05)	
DO NOT WRITE IN THIS SPA	ACE	4. FEI Number	plicable
6. Name and Address of Current Registered Agent		Fee Required	
NETSCH, MAITTE ESQ 122 MADEIRA AVENUE CORAL GABLES, FL 33134		DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this statement for the purpose of changing its regist the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Repair	tered office or registere		accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fir Trust Fund Contribution		00 May Be U00000303836 Ind to Fees 04/30/08-80065-001 150.	.00
10. OFFICERS AND DIRECTORS TITLE PVST NAME GARBER, FREDA STREET ADDRESS 1627 BRICKELL AVENUE, #2904 CITY-SI-ZIP MIAMI, FL 33129			
ITTLE D NAME GARBER, FREDA STREET ADDRESS 1627 BRICKELL AVENUE, #2904 CITY-ST-ZIP MIAMI, FL 33129		en e	î
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	•
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE	•
TITLE NAME STREET ADDRESS CITY - ST-ZIP			
TILE 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 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:

CITY ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAMES OFFICER OR DIRECTOR

4/12/08 786-374-7449

Daytime Phone #