

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148408

FILED
Apr 29, 2008
Secretary of State

Entity Name: DRAPES 2NV CORPORATION

Current Principal Place of Business:

9401 NW 106TH STREET
106
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

PO BOX 822211
PEMBORKE PINES, FL 33082

New Mailing Address:

9401 NW 106TH STREET
106
MEDLEY, FL 33178

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTANEDA, JOSE W
9401 NW 106TH STREET
MEDLEY, FL 33178 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASTANEDA, JOSE W
Address: PO BOX 822211
City-St-Zip: PEMBROKE PINES, FL 33082

Title: P () Delete
Name: CASTANEDA, EUGENE E
Address: PO BOX 822211
City-St-Zip: PEMBROKE PINES, FL 33082

Title: P () Delete
Name: CASTANEDA, EUGENIO M
Address: PO BOX 822211
City-St-Zip: PEMBROKE PINES, FL 33082

Title: P (X) Delete
Name: CASTANEDA, MARIA
Address: PO BOX 822211
City-St-Zip: PEMBROKE PINES, FL 33082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CASTANEDA, JOSE W
Address: 9401 NW 106TH STREET #106
City-St-Zip: MEDLEY, FL 33178

Title: P (X) Change () Addition
Name: CASTANEDA, EUGENE
Address: 9401 NW 106TH STREET #106
City-St-Zip: MEDLEY, FL 33178

Title: VP (X) Change () Addition
Name: CASTANEDA, ANA
Address: 9401 NW 106TH STREET # 106
City-St-Zip: MEDLEY, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE CASTANEDA

VP

04/29/2008

Electronic Signature of Signing Officer or Director

Date