


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90101 013 ***150.00

DOCUMENT # P05000156589 1. Entity Name SOARES PEREIRA BROTHERS, INC.					
Principal Place of Business 1210 MILLENNIUM PARKWAY 1031 BRANDON, FL 33511			Mailing Address 1210 MILLENNIUM PARKWAY 1031 BRANDON, FL 33511		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 1210 millennium Pkwy 1014			
City & State Zip		City & State Brandon FL Zip 33511		Country US	
4. FEI Number 20-3995834				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BRAZIL-TAMPA BAY CHAMBER OF COMMERCE INC 1206 MILLENNIUM PKY 2040 BRANDON, FL 33511			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P PEREIRA, CLAUDERSON S 1210 MILLENNIUM PARKWAY BRANDON, FL 33511	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP PEREIRA, CLAUDINEI S 1210 MILLENNIUM PARKWAY BRANDON, FL 33511	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete				
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: Deborah B Michaelis Deborah TB Michaelis 04/30/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

April 30, 2007

ATTACHMENT

40106314

Dear Sir or Madam:

#A05000156589

Please note that our address has changed and the Report card was never forwarded to us.

I would respectfully request that you accept our payment of \$150.00 as this situation was out of our control.

Sincerely

Deborah Michaelis

Administrator / Bookkeeper