

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157785

Entity Name: 3600 PROJECT, INC.

FILED  
Apr 26, 2007  
Secretary of State

**Current Principal Place of Business:**

3600 SW 23 STREET  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

7935 SW 26 STREET  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 20-3875146

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONTERO, ALEX  
7935 SW 26 STREET  
MIAMI, FL 33155 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: MONTERO, ALEX  
Address: 7935 SW 26 STREET  
City-St-Zip: MIAMI, FL 33155

Title: P ( ) Delete  
Name: PEREZ, EDUARDO  
Address: 3061 SW 133 CT.  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition  
Name: PEREZ, EDUARDO  
Address: 9751 SW 35 ST.  
City-St-Zip: MIAMI, FL 33165

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: ALEX MONTERO

P

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date