2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158678

Entity Name: LAS LILAS, INC.

FILED Aug 31, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1247 ALTON ROAD 2121 PONCE DE LEON BLVD. MIAMI BEACH, FL 33139

SUITE 740

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2121 PONCE DE LEON BLVD. 1247 ALTON ROAD SUITE 740 MIAMI BEACH, FL 33139

CORAL GABLES, FL 33134

FEI Number: 20-3892823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BAGNASCO, VALERIA PIERI, LUCIANO M 2121 PONCE DE LEON BLVD. 1247 ALTON ROAD

MIAMI BEACH, FL 33139 SUITE 740 US CORAL GABLES, FL 33134 US

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: LUCIANO M. PIERI 08/31/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

PULIT, GONZALO PULIT, GONZALO Name: Name: 540 WEST AVE. # 1413 1247 ALTON ROAD Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: Title: (X) Change () Addition () Delete

PULIT, FRANCISCO PULIT, FRANCISCO Name: Name: 1247 ALTON ROAD 540 WEST AVE. # 1413 Address: Address: MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition DE PULIT, MARIA MARTHA T DE PULIT, MARIA MARTHA T Name: Name: 1247 ALTON ROAD 540 WEST AVE. # 1413 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete Title: () Change (X) Addition

PULIT, MARCELA T Name: Name: Address: Address: 540 WEST AVE. # 1413 City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

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: GONZALO PULIT D 08/31/2007