

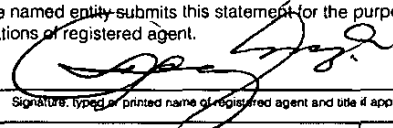
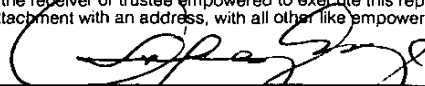


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P06000002078</b> 1. Entity Name <b>PIPO PONY PARTY, CORP.</b>						<b>FILED</b> <b>07 JAN 22 PM 12:11</b> <b>SECRETARY OF STATE</b> <b>TALLAHASSEE, FLORIDA</b>		
Principal Place of Business <b>12760 SW 50 TERR.</b> <b>MIAMI, FL 33175</b>				Mailing Address <b>12760 SW 50 TERR.</b> <b>MIAMI, FL 33175</b>				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		01192007 Chg-P CR2E034 (12/06)				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>20-4054274</b>				Applied For
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Not Applicable
Zip	Country	Zip	Country					
<b>6. Name and Address of Current Registered Agent</b>  <b>LOPEZ, AGUSTIN A</b> <b>12760 SW 50 TERR.</b> <b>MIAMI, FL 33175</b>				<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> 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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE:   <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div>								
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees <b>000086455606</b> <b>01/29/07--01050--015 **150.00</b>				
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>LOPEZ, AGUSTIN A</b> <b>2123 SW 27 AVE</b> <b>MIAMI, FL 33145</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<b>K. Eckel</b> <b>JAN 22 2007</b> <small>Date</small> <small>Daytime Phone #</small>				