

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005218

FILED
Feb 28, 2008
Secretary of State

Entity Name: AVITALNET SUPPLY CORP.

Current Principal Place of Business:

577 SW 111 LANE
1-203
PEMBROKE PINES, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

577 SW 111 LANE
1-203
PEMBROKE PINES, FL 33025 US

New Mailing Address:

FEI Number: 55-0915360 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINERA, IBEL
577 SW 111 LANE
1-203
PEMBROKE PINES, FL 33025 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: DIR () Delete
Name: VILLALBA, JORGE A
Address: 577 SW 111 LANE
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: DIR (X) Delete
Name: PINERA, IBEL
Address: 577 SW 111 LANE
City-St-Zip: PEMBROKE PINES, FL 33025 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: PINERA, IBEL
Address: 577 SW 111 LANE 1-203
City-St-Zip: PEMBROKE PINES, FL 33025 US

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: IBEL PINERA

DIR

02/28/2008

Electronic Signature of Signing Officer or Director

_____ Date