2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020180

Title:

Name:

Address: City-St-Zip:

Entity Name: BRADLEYVILE CORPORATION

(X) Delete

CHACAO, MR 1080

BESTINVEST CASA DE B, OLSA C.A.

AVE. FCO DE MIRANDA TORRE KPMG PISO 1

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 160 SW 167 AVE PEMBROKE PINES, FL 33027 **Current Mailing Address: New Mailing Address:** 160 SW 167 AVE PEMBROKE PINES, FL 33027 FEI Number: 20-4557462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROMASANTA, FAUSTA 160 SW 167 AVE PEMBROKE PINES, FL 33027 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROMASANTA, FAUSTA ROMASANTA, FAUSTA Name: Name: 160 SW 167 AVE 160 SW 167 AVE Address: Address: City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33027 Title: VΡ Title: (X) Delete () Change () Addition OTERO, LUIS Name: Name: 19443 NW 23 PLACE Address: Address: PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip: Title:

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: FAUSTA L ROMASANTA 04/28/2008

() Change () Addition