## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P06000027211

SMALL WONDERS SOUTH, INC.



**FILED** May 19, 2008 8:00 am Secretary of State

05-19-2008 90032 026 \*\*\*158.75

Principal Place of Business

119 S. REDLAND ROAD FLORIDA CITY, FL 33034 Mailing Address

10725 SW 216TH ST #308

MIAMI, FL 33170



02222008

No Chg-P

CR2E034 (11/05)

4. FEI Number 42-1703580

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUERRA, ARMANDO 10725 SW 216TH ST #308 MIAMI, FL 33170

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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.							
SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finan  Trust Fund Contribution.			· · ·	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUERRA, ARMANDO 10725 SW 216TH ST;#308 MIAMI, FL 33170						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUERRA, ELENA 10725 SW 216TH ST, #308 MIAMI, FL 33170						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCCR. GUERLA, MICHOL 10725 SW 216 St. # 308 MIANI FL 33170			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 artashment with an address, with all other the empowered.							

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FLORIDA DE	PARTME	NT OF STATE					
Division of	CORPO	RATIONS	2411612	The way			
Home Cor	ntact Us	E-Filing Services	Document Searches	Forms	Help		
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THE PROPERTY OF THE PROPERTY O							
Annual Re	epor <del>t O</del>	nline Filing					
Document Number P06000027211							
Business Entity Name SMALL WONDERS SOUTH, INC.							
FEI Number   42   -   1703580							
FEI Number Statu	s . Listed /	Above C Applied For C	Not Applicable				
			, тост <b>др</b> ишено				
Certificate of Status [] \$8.75 (Optional)							
Election Campaign Financing Trust Fund Contribution O Yes No  Principal Place of Business							
Address		DLAND ROAD	(BO Bay ant assess	table)			
Suite, Apt. #, etc.	1119 3. 112	DLAND ROAD	(PO Box not accep	table)			
City, State	FLORIDA	CITY   F					
Zip Code & Count	·	<u> </u>	nauno cue d				
Mailing Address							
If your mailing address is the same as the principal address above, please check the box below. Otherwise, enter							
your mailing address.  Mailing address same as principal address							
Address		/ 216TH ST	-				
Suite, Apt. #, etc.	#308						
City, State	MIAMI	[]F	<u>L</u>				
Zip Code & Count	ry 33170		and and :				
Name And Address of Registered Agent							
		NOUS DA	- I I				
Name (Last, First, Middle, Title) GUERRA ,ARMANDO , , ,							
Business to serve as RA							
Street Address In Florida 10725 SW 216TH ST (PO Box no				ox not acceptable)			
Suite, Apt. #, etc. #308							
City, State MIAMI, FL							

www.sundiz.org - Department of St	ATTACHMENT						
	11/10/58/33						
Zip Code & Country 33170	us 2000027211						
If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.							
Registered Agent Signature							
This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.							
Officer/Director Name And Address							
Name And Address #1							
Title	D						
Name (Last, First, Middle, Title)	GUERRA ARMANDO ,						
Entity Name to serve as Officer/Director							
Street Address	10725 SW 216TH ST, #308						
City, State	MIAMI , FL						
Zip Code & Country	33170						
Name And Address #2							
Title	D						
Name (Last, First, Middle, Title)	GUERRA ELENA , ,						
Entity Name to serve as Officer/Directo							
Street Address	10725 SW 216TH ST, #308						
City, State	MIAMI , FL						
Zip Code & Country	33170						
Name And Address #3							
Title	Secr						
Name (Last, First, Middle, Title) - OR -	Guerra , Nichol , M , Ms.						
Entity Name to serve as Officer/Directo	r						
Street Address	10725 SW 216 Street #308						
City, State	Mlami , FL						
Zip Code & Country	33170						