

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000033051

**FILED**  
**Jul 17, 2007**  
**Secretary of State****Entity Name:** FRANKTITUDE THREE, INC.**Current Principal Place of Business:**1221 BRICKELL AVENUE, SUITE 1590  
MIAMI, FL 33166**New Principal Place of Business:**2600 NW 87 AVENUE  
#13  
DORAL, FL 33172**Current Mailing Address:**1221 BRICKELL AVENUE, SUITE 1590  
MIAMI, FL 33166**New Mailing Address:**2600 NW 87 AVENUE  
#13  
DORAL, FL 33172**FEI Number:** 20-4441252**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PADRO, JOSE F  
8325 NW 53 ST, SUITE 102  
MIAMI, FL 33166 US**Name and Address of New Registered Agent:**FERNANDEZ, ISABEL L  
2600 NW 87 AVENUE  
#13  
DORAL, FL 33172 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: ISABEL L. FERNANDEZ

07/17/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: SCHACHNER, JOSE  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33166

Title: PD (X) Delete  
Name: WURMAN, ARI  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33166

Title: TD (X) Delete  
Name: ROSENBLUT, JORGE  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33166

Title: S (X) Delete  
Name: CALAMA, ISABEL  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, ISABEL L  
Address: 2600 NW 87 AVENUE, #13  
City-St-Zip: DORAL, FL 33172

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ISABEL L. FERNANDEZ

P

07/17/2007

Electronic Signature of Signing Officer or Director

Date