

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90246 032 ***150.00

DOCUMENT # P06000037726

1. Entity Name
ATHENAS FINANCE INC.



Principal Place of Business
520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131

Mailing Address
520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131

40000000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04022007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-4495870

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRANSGLOBAL CORPORATE ADMINISTRATION, LLC
520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

SIGNATURE

Signature is typed or printed name of registered agent and is not applicable

(NOTE: Registered Agent signature required when changing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
D KURRELS, ROBERTO LUIS ☐ Delete
STREET ADDRESS
520 BRICKELL KEY DRIVE, SUITE 0-305
CITY- ST- ZIP
MIAMI, FL 33131

TITLE
NAME
☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
D GUERRA JUNIOR, ODILON PEREIRA ☐ Delete
STREET ADDRESS
520 BRICKELL KEY DRIVE, SUITE 0-305
CITY- ST- ZIP
MIAMI, FL 33131

TITLE
NAME
☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
D COSTA REIS, SERGIO S ☐ Delete
STREET ADDRESS
520 BRICKELL KEY DRIVE, SUITE 0-305
CITY- ST- ZIP
MIAMI, FL 33131

TITLE
NAME
☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
☐ Delete
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NAME
☐ Change ☐ Addition
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 information 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 authorized 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 affidavit with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Declarative Phone #

Robert L. Kurrels
ROBERTO L. KURRELS 04/05/07 (305) 374-3800