

2007

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Mar 22, 2007 8:00 am
Secretary of State**

03-22-2007 90147 001 ***600.00

DOCUMENT # P06000091574					
1. Entity Name FIT Markets Corp.					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 7300 N.W. 19th St. <small>Suite, Apt. #, etc.</small> Suite 101 <small>City & State</small> Miami, FL <small>Zip</small> 33126-1222			3. Mailing Address 7300 N.W. 19th St. <small>Suite, Apt. #, etc.</small> Suite 101 <small>City & State</small> Miami, FL <small>Zip</small> 33126-1222		
			4. FEI Number 20-5188385		Applied For <input type="checkbox"/> Not Applicable
			5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE				7. Name and Address of Current Registered Agent	
				Name del Valle, Manuel R.	
				Street Address (P.O. Box Number is Not Acceptable) 7300 N.W. 19th St.	
				Suite 101	
				City Miami	Zip Code FL 33126-1222
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$650.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P Baez, Margarita Calle 100, #8A-37, Torre A #501 Bogota, Colombia		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S/T Sanchez, Jairo Calle 100, #8A-37, Torre A #501 Bogota, Colombia		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Margarita Baez</i>		Margarita Baez		13-03-07	305-477-6116
SIGNATURE AND TYPED OR PRINTED NAME OF SINGING OFFICER OR DIRECTOR		Date		Daytime Phone #	