2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR

remus 5

Aug 30, 2007 8:00 am Secretary of State DOCUMENT # P06000106569 1. Entity Name 08-30-2007 90040 001 ***150.00 CINPRO, INC. 08-30-2007 90040 002 *****5.00 Principal Place of Business Mailing Address 1133 HIDDEN VALLEY WAY WESTON FL 33327 1133 HIDDEN VALLEY WAY WESTON FL 33327 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1133 HIDDEN VALLEY WAY 1133 HIDDEN VALLEY WAY. Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/07) City & State City & State 4. FEI Number Applied For FURIDA. 20-5380832 WESTON -FLORIDA WESTON ot Applicable Country Zip Zıp Country \$8.75 Additional 5. Certificate of Status Desired 333-2 T 333 Z T BROWARD BROWARD Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARRERO, JOSE C Street Address (P.O. Box Number is Not Acceptable) 1820 NORTH CORPORATE LAKES BLVD SUITE# 105 WESTON FL 33326 City 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, typed or pointed name of registered agent and title if applicable (NOTE Registered Agent signature regained when reinstating) DATE FILE NOW!!! FEE IS \$550.00 S.607 193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financina DUE BY September 5, 2007 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILE HITLE ☐ Delete Cnange ☐ Addition PERILLA, GERMAN NAME NAME STREET ADDRESS 1133 HIDDEN VALLEY WAY STREET ADDRESS CITY-ST-ZIP WESTON FL 33327 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME PERILLA, GERMAN NAME 1133 HIDDEN VALLEY WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON FL 33327 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition PERILLA, MARCELA MAME STREET ADDRESS 1133 HIDDEN VALLEY WAY STREET ADDRESS CITY ST-7|P WESTON EL 33327 CITY ST ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

FILED

8/22/07 (954)384-4532