## **2008 FOR PROFIT CORPORATION**

## **FILED** e

ANNUAL REPORT				_			Apr 11, 2008 08:00			
DOCU	MENT # P060001097			Sec	cretary of	f State				
1. Entity Nam										
DIGITAL	111/2010 (1.010) OOTH, OTH, (1	, OIV		gradens e. s	بالمعامر وأناه	**************************************				
Principal Plac	te of Business	Mailing Address	- Control	-						
8109 NW 29		8109 NW 29 ST.								
MIAMI, FL 3		MIAMI, FL 33122								
, ,	•	•			<b>.</b>		d &0  1    <b> 3</b>			
	,			04082008	No Chg-P	CR2E034 (11/05)				
Ċ	O NOT WRITE	IN THIS SPA	CE ·	4. FEI Number	r	Ar	oplied For			
	, ,	•	•	20-5430	0211	£0.75	ot Applicable			
<b>.</b> .	•	•		5. Certificate	of Status Desired	Fee Require				
	6. Name and Address of Current Re	gistered Agent					, .			
CARPENA, JUAN C.				DO	NOT WI	RITE	· ·			
8109 NW 29 ST. MIAMI, FL 33122				- , -	HIS SP		* .			
				117	HIS SPA	ACE	•			
			<u> </u>			1 1	. "., 4			
	e named entity submits this statement for the tions of registered agent.	e purpose of changing its register	ed office or register	red agent, or both	n, in the State of Flori	da. I am familiar with,	and accept			
SIGNATURE.		NIA								
1771	Signature, typed or printed name of registered agent and	itte if applicable. (NOTE: Registere	ed Agent signature required	t when reinstating)		DATE				
	.E NOW!!! FEE IS \$150.00 lay 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		.00 May Be led to Fees		•				
10.	OFFICERS AND DIF	RECTORS			H00000	1002071	,			
TITLE NAME	DP CARPENA, JUAN C.		, ,			-80083-019 1	58.75 · /			
STREET ADDRESS	8109 NW 29 ST.			ŧ	1, 1	•				
CITY-ST-ZIP TITLE	MIAMI, FL 33122		-				• • • • • • • • • • • • • • • • • • • •			
NAME	CHINEN, PAUL					. * . *				
STREET ADDRESS CITY+ST-ZiP	8109 NW 29 ST. MIAMI, FL 33122			3	•					
TITLE	D		1		•					
NAME STREET ADDRESS	TAZOE, RICARDO 8109 NW 29 ST.									
CITY-ST-ZIP	MIAMI, FL 33122		,	DO	NOT W	RITE	, , , , ,			
TITLE		•	, ,	IN 1	THIS SP	ACE				
NAME STREET ADDRESS			•			·				
CITY-ST-ZIP			,							
TITLE , name					s 81 5 20 5 105 44	and at the State of	A PAPE IN THE TANK OF THE PAPER IN THE PAPER			
STREET ADDRESS	Superior Control of the State o		And the second				e e			
TITLE - 00	2 2 2 2 2	··					1.			
NAME	Complete Com	1	1		• • • • • •	***	31 .31 * * (192			
STREET ADDRESS	/ \	N								

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 impowered 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 address, with all other the empowered.

SIGNATURE:

JUAN. C. CARIENA 04/08/2008 305-463-9195