## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 12, 2007 8:00 am Secretary of State 06-08-2007 90001 028 \*\*\*150.00

1. Entity Nam	e	# P0600011								
Principal Place of Business Mailing Address						] .				
6140 SW 156 COURT			6140 SW 156 COURT Miami, FL 33193			66020278				
MIAMI, FL 33193 MIAMI, FL 33193									HIR 11910 HTHE II	RITEL II ITSI
Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-		_		
						05032007	Chg-P	CH2E	34 (12/06)	
City & State			City & State			4. FEI Numbe	120-551	103	<i>(</i> )   — —	oplied For of Applicable
Zip		Country	Zip	Cour	ntry	5. Certificate	of Status Desired	O	\$8.75 Ad	
6. Name and Address of Current			legistered Agent			7. Name and Address of New Registered Agent				
ZERRA C	ADI OS A		Namo							
ZERPA, CARLOS A 6140 SW 156 COURT MIAMI, FL FL					Street Address (P.O. Box Number is Not Acceptable)					
					City				Zip Coo	le
0 The shows	and only	r submits this statement	for the purpose of changing it	n (Anie)	<u> </u>	ved appet or box	h in the State of Ek	FL		
	tions of regist		ior the purpose of changing it	s register	an onice or registe	red agent, or bo	ir, iri kie siale (i FK	AICA, TAIII	iamilar willi	and accept
SIGNATURE.		\$1 51				DATE		}		
	Signature, typed	or pricted name of registered ager	nt and one ir appricatore. (NO	IE: HOGSIETE	od Agent signatura require	O when reinstating)		DAIE		
		! FEE IS \$550.00 stember 14, 2007	9. Election Campa Trust Fund Con			.00 May Be ded to Fees				
10.		OFFICERS ANI		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND		S IN 11
TITLE NAME	P Delete III								Change	Addition
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NAME	•		C) Still	NAN						
STREET ADDRESS CITY-ST-ZIP					EET ADORESS (+ST+71P					-
l	Certify that Ih	e information supplied w	ith this filing does not qualify t			d in Chapter 119	, Florida Statutes. I	further cer	tify that the in	nformation
12. Thereby certify that the information sopplies with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report or suppliemental report is true and accupite and that my signature shall have the same legal effect as if made under oath; that it am an officer or director of the corporation or the pecieiver 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 changed, or on an attachment with an address, was all other like empowered.										
	- /	general with an address	, wan au other ike empowered	J.		5/74	67	<i>3a</i> /	218_	939
SIGNAT	URE: \		4-			- 1201	V/	042		<u>, , , ,</u> /