2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# P06000145803

Entity Name: PHLEBOTOMY MOBIL, INC.

Current Principal Place of Business:

C/O SOUTH BROWARD ACCOUNTING SERVICE INC
5599 S UNIVERSITY DRIVE, STE 306
DAVIE, FL 33328

New Principal Place of Business:

% SOUTH BROWARD ACCTNG SVCS
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328

Current Mailing Address:

C/O SOUTH BROWARD ACCOUNTING SERVICE INC
5599 S UNIVERSITY DRIVE, STE 306
DAVIE, FL 33328

New Mailing Address:

% SOUTH BROWARD ACCTNG SVCS
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHEDIAK, MIRTA
5599 S UNIVERSITY DRIVE
STE. 306
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

CHEDIAK, MIRTA
% SOUTH BROWARD ACCTNG SVCS
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328 US

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.

SIGNATURE: MIRTA CHEDIAK 04/26/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARRA, PABLO
Address: 3136 S.W. 142ND AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PARRA, PABLO
Address: 3136 SW 142ND AVENUE
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PABLO PARRA D 04/26/2007
Electronic Signature of Signing Officer or Director Date