2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000148115

Entity Name: FLORIDIANS IN ACTION, INC.

FILED Jun 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9745 SUNSET DR., #217 MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

9745 SUNSET DR., #217 528 SW 88 PL EAST MIAMI, FL 33173 MIAMI, FL 33174

FEI Number: 01-0879608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BELEN VALLADARES, MARIA 9745 SUNSET DR., #217 MIAMI, FL 33173 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: FAVRA, WALDO JR Name: FAURA, WALDO JR

 Address:
 9745 SUNSET DR., #217
 Address:
 9745 SUNSET DR., #217

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

Title: S () Delete Title: S (X) Change () Addition
Name: FAVRA WALDO SR
Name: FAURA WALDO SR

 Name:
 FAVRA, WALDO SR.
 Name:
 FAURA, WALDO SR.

 Address:
 9745 SUNSET DR., #217
 Address:
 9745 SUNSET DR., #217

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

Title: V () Delete Title: V (X) Change () Addition

 Name:
 BELEN VALLADARES, MARIA
 Name:
 VALLADARES, MARIA B

 Address:
 9745 SUNSET DR., #217
 Address:
 9745 SUNSET DR., #217

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify 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: WALDO FAURA JR P 06/15/2007