2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008
Secretary of State

DOCUMENT# P07000018507

Entity Name: ROMAN ILLUMINATION & DESIGN, INC.

Current Principal Place of Business:

5600 COLLINS AVENUE
8N
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5600 COLLINS AVENUE
8N
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 20-8440786 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PADGETT BUSINESS SERVICES
554 BEE RIDGE RD.
F4
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LAREZ, MARIANNA
Address: 5600 COLLINS AVENUE #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: VP ( ) Delete
Name: PETERSEN, ALEX
Address: 5600 COLLINS AVENUE #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: VP ( ) Delete
Name: LIZCANO, CESAR
Address: 5600 COLLINS AVE. #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LAREZ, MARIANNA R
Address: 5600 COLLINS AVENUE #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: VPD (X) Change ( ) Addition
Name: PETERSEN, ALEX
Address: 5600 COLLINS AVENUE #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: VPD (X) Change ( ) Addition
Name: LIZCANO, CESAR
Address: 5600 COLLINS AVE. #8N
City-St-Zip: MIAMI BEACH, FL 33134

Title: T ( ) Change (X) Addition
Name: MUÑOZ, JOHN
Address: 5600 COLLINS AVE. #8N
City-St-Zip: MIAMI BEACH, FL 33130

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: MARIANNA R. LAREZ PD 02/18/2008

Electronic Signature of Signing Officer or Director — Date