

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 16, 2008 8:00 am**  
**Secretary of State**

05-16-2008 90015 039 \*\*\*150.00

<b>DOCUMENT # P07000021512</b> 1. Entity Name <b>OCHO RIOS HOLDING CORP.</b>					
Principal Place of Business <b>2051 N.W. 15 AVENUE MIAMI, FL 33142</b>			Mailing Address <b>2051 N.W. 15 AVENUE MIAMI, FL 33142</b>		
2. Principal Place of Business - No P.O. Box # <b>9956 SW 155 CT.</b>		3. Mailing Address Suite, Apt. #, etc.			
City & State <b>MIAMI FL</b>		City & State			
Zip <b>33196</b>		Country		Country	
4. FEI Number <b>APPLIED FOR</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  <b>LUE, ASTON 9956 S.W. 155 COURT MIAMI, FL 33196</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P LUE, ASTON 9956 S.W. 155 COURT MIAMI, FL 3196</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP LUE, MICHELLE 9956 S.W. 155 COURT MIAMI, FL 33196</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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, with all other like empowered.					
<b>SIGNATURE:</b>			5/13/2008 (305) 975-0808		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date City/State/Phone #		

# ATTACHMENT

Ocho Rios Holding Corp  
9956 SW 155 Court  
Miami, FL 33196

May 13, 2008

Florida Department of State  
Secretary of State  
Division of Corporations  
P.O. Box 8700  
Tallahassee, FL 32314

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# P 07000021512

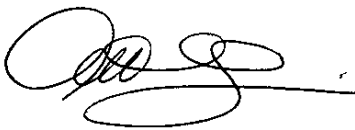
Dear Sir:

This is to state that I have not received the annual report notice and am enclosing the annual report renewal fee, kindly requesting that any penalty be waived for this time only.

Also, please note the change of address.

Thank you!

Sincerely,



Aston Lue  
P  
For the Secretary