

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State

01-07-2008 90037 004 ***158.75

DOCUMENT # P07000022519					
1. Entity Name WILLIE & CLARA, INC.					
Principal Place of Business 9121 NW 13TH COURT MIAMI, FL 33147			Mailing Address 9121 NW 13TH COURT MIAMI, FL 33147		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-8621621	
5. Certificate of Status Desired				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
PETTIT, MARTIN T 5725 SW 57TH TERRACE MIAMI, FL 33143				Name Street Address (P.O. Box Number is Not Acceptable) City FL 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: <u>Pettit, Martin T</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE: <u>1/5/08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME PETTIT, MARTIN T STREET ADDRESS 9121 NW 13TH COURT CITY-ST-ZIP MIAMI, FL 33147	<input type="checkbox"/> Delete		TITLE RA NAME Registered Agent STREET ADDRESS Pettit, Martin T CITY-ST-ZIP 5725 S.W. 57th Terrace Miami, Fla. 33143	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P NAME Doretha Thomas STREET ADDRESS 9121 N.W. 13th Court CITY-ST-ZIP Miami, Fla 33147	<input type="checkbox"/> Delete		TITLE P NAME Doretha Thomas STREET ADDRESS 9121 N.W. 13th Court CITY-ST-ZIP Miami, Fla 33147	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VP NAME Robert C. Thomas STREET ADDRESS 9121 N.W. 13th Court CITY-ST-ZIP Miami, Fla 33147	<input type="checkbox"/> Delete		TITLE VP NAME Robert C. Thomas STREET ADDRESS 9121 N.W. 13th Court CITY-ST-ZIP Miami, Fla 33147	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE T NAME Vera Gabriel (Treasure) STREET ADDRESS 3146 N.W. 172nd Terrace CITY-ST-ZIP Miami Gardens, FL 33055	<input type="checkbox"/> Delete		TITLE T NAME Vera Gabriel (Treasure) STREET ADDRESS 3146 N.W. 172nd Terrace CITY-ST-ZIP Miami Gardens, FL 33055	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE Secretary NAME Diane Thomas STREET ADDRESS 20A Paxton Drive CITY-ST-ZIP Bloomfield, NJ 07003	<input type="checkbox"/> Delete		TITLE Secretary NAME Diane Thomas STREET ADDRESS 20A Paxton Drive CITY-ST-ZIP Bloomfield, NJ 07003	<input type="checkbox"/> Change <input checked="" 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.					
SIGNATURE: <u>Doretha Thomas (President)</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>1/5/08</u> Daytime Phone #: <u>(305) 691-4992</u>		