2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000039979

Entity Name: BENNA, INC.

FILED May 15, 2008 Secretary of State

Name and Address of Current Registered Agent: IGLESIAS, ADOLFO 13170 SW 128 ST SUITE 203 MIAMI, FL 33186 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or lin 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 ().	1934 NE 147 TERRACE NORTH MIAMI, FL 33181 New Mailing Address: 1934 NE 147 TERRACE NORTH MIAMI, FL 33181 The properties of Status Desired () Registered Agent: Name and Address of New Registered Agent: This statement for the purpose of changing its registered office or registered agent, or both, ture of Registered Agent Date S., the corporation did not receive the prior notice. Ind Contribution (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: Name: Name: Address: City-St-Zip:				
New Mailing Address: 1934 NE 147 TERRACE NORTH MIAMI, FL 33181 FEI Number: 20-8755651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Name: Address: Name: () Change () Addition Name: Address: New Mailing Address: 1934 NE 147 TERRACE NORTH MIAMI, FL 33181 New Mailing Address: 1934 NE 147 TERRACE NORTH MIAMI, FL 33181 New Mailing Address:	NORTH MIAMI, FL 33181 New Mailing Address: 1934 NE 147 TERRACE NORTH MIAMI, FL 33181 The Applied For () FEI Number Not Applicable () Certificate of Status Desired () Registered Agent: Name and Address of New Registered Agent: this statement for the purpose of changing its registered office or registered agent, or both, ture of Registered Agent Date S., the corporation did not receive the prior notice. Ind Contribution (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Change () Addition Name: Address: City-St-Zip:	Current Principal Place	of Business:	New Principal Place	of Business:
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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: ANA CAROLINA RIOS DSVP 05/15/2008