2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000055416

Entity Name: 3D MANAGEMENT CORP.

FILED Apr 30, 2008 Secretary of State

Littly Na	unie. JD MAN	AGLIVILINI CORF.			
Current Principal Place of Business:			New Principal Place of Business:		
6330 N.W. 113TH TERRACE HIALEAH, FL 33012			2214 SW 137TH PL MIAMI, FL 33175	2214 SW 137TH PLACE MIAMI, FL 33175	
Current Mailing Address:			New Mailing Address:		
6330 N.W. 113TH TERRACE HIALEAH, FL 33012			2214 SW 137TH PLACE MIAMI, FL 33175		
FEI Number	r: 26-0141249	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:		
	DAYNERIS 137TH PLACE 33175 US				
	e named entity te of Florida.	submits this statement for the	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATU	IRE:				
Election Ca		nic Signature of Registered Ag g Trust Fund Contribution ().	ent	Date	
	S AND DIREC	- ,,	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (PEREZ, DAYN 2214 S.W. 137) Delete ERIS TH PLACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PEREZ, DULC 892 E 24TH ST	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PORRAS, DAN 6330 N.W. 113	TH TERRACE	Title: Name: Address: City-St-Zip:	() Change() Addition	

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.

Р	04/30/2008
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