2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088635

FILED Apr 29, 2009 Secretary of State

Entity Nar	ne: 3241 OAI	K INC.				
Current Principal Place of Business:			New Principa	New Principal Place of Business:		
10733 NW 58 STREET DORAL, FL 33178				10733 NW 58TH STREET DORAL, FL 33178		
Current M	ailing Addres	ss:	New Mailing A	New Mailing Address:		
10733 NW DORAL, FI	58 STREET L 33178		11505 SW 77 A PINCREST, FL			
FEI Number:	26-0671972	FEI Number Applied For ()	FEI Number Not Applicab	le () Certificate of Status Desired (X)		
Name and	Address of 0	Current Registered Agent:	Name and Ad	Name and Address of New Registered Agent:		
DIAZ, GUS 10733 NW DORAL, FI	58 STREET	S	11505 SW 77 A	DIAZ, GUSTAVO R 11505 SW 77 AVENUE PINCREST, FL 33156 US		
	named entity of Florida.	submits this statement for the p	urpose of changing its re	egistered office or registered agent, or bo	oth,	
SIGNATUR	RE:			04/29/2009		
	Electron	nic Signature of Registered Age	nt	Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (DIAZ, GUSTAV 10733 NW 58 : DORAL, FL 33	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPD (DIAZ, MARIA L 10733 NW 58 : DORAL, FL 33	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD (DIAZ MENESE 10733 NW 58 : DORAL, FL 33	STREET	Title: Name: Address: Citv-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.

SIGNATURE: GUSTAVO R DIAZ PD 04/29/2009