2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119714

Entity Name: VELASQUEZ VELASQUEZ CORPORATION

FILED Jan 30, 2008 Secretary of State

Littly Na	IIIe. VELAGGI	ULZ VELAGQUEZ CORFORA	IION			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
10986 NW DORAL, F	72 TERR. L 33178		913 NORM MIAMI BEA	IANDY DR ACH, FL 3314	1	
Current Mailing Address:			New Mailing Address:			
10986 NW DORAL, F	72 TERR. L 33178					
FEI Number	: 77-0703745	FEI Number Applied For()	FEI Number Not App	icable ()	Certificate of Status Desired ()	
Name and	l Address of C	Current Registered Agent:	Name and	Address of I	New Registered Agent:	
10986 NW DORAL, F The above			urpose of changing i	ts registered o	office or registered agent, or both	
SIGNATUI						
SICINATO		nic Signature of Registered Age	nt		 Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PD () VELASQUEZ, F 10986 NW 72 T DORAL, FL 33	ΓERR.	Title: Name: Address: City-St-Zip:	PD (X VELASQUEZ, I 10986 NW 72 DORAL, FL 33	TERR.	
Title: Name: Address: City-St-Zip:	VD () VELASQUEZ, M 10986 NW 72 T DORAL, FL 33	ΓERR.	Title: Name: Address: City-St-Zip:	VD (X VELASQUEZ, 3 10986 NW 72 DORAL, FL 33	TERR.	
Title: Name: Address: City-St-Zip:	TD () VELASQUEZ, S 10986 NW 72 T DORAL, FL 33	ΓERR.	Title: Name: Address: City-St-Zip:	TD (X VELASQUEZ, 10986 NW 72 DORAL, FL 33	TERR.	
Title: Name: Address: City-St-Zip:	TD () VELASQUEZ, T 10986 NW 72 T DORAL, FL 33	ΓERR.	Title: Name: Address: City-St-Zip:	SD (X VELASQUEZ, I 10986 NW 72 DORAL, FL 33	TERRACE	
Title: Name: Address: City-St-Zip:	SD (X VELASQUEZ, J 10986 NW 72 T DORAL, FL 33	ΓERR.	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.

SIGNATURE: MIRIAM VELASQUEZ PD 01/30/2008