2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37134

Title:

Name:

Address:

City-St-Zip:

FILED Apr 19, 2007 Secretary of State

		OF FLORIDA, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
5200 BLUE MIAMI, FL		RIVE, SUITE 500		
Current Mailing Address:		New Mailing Address:		
5200 BLUE MIAMI, FL		RIVE, SUITE 500		
FEI Number:	13-1247390	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	of New Registered Agent:
	H BISCAYNE	ANY OF MIAMI BLVD		
The above in the State		submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,
SIGNATUR	!E:			
SIGNATUR		nic Signature of Registered Ag	ent	Date
	Electror	nic Signature of Registered Ag g Trust Fund Contribution().	ent	Date
Election Cam	Electror	g Trust Fund Contribution ().		Date ES TO OFFICERS AND DIRECTORS:
Election Cam	Electron	g Trust Fund Contribution (). TORS:) Delete I RE #92117		
Election Cam OFFICERS Title: Name: Address:	Electron paign Financin AND DIREC CD (JAFFRE, YANN 41 RUE MARTE CLICHY CEDE	g Trust Fund Contribution (). TORS:) Delete RE #92117 X.,) Delete ENT E #92117	ADDITIONS/CHANGI Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:
Election Cam OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron paign Financin AND DIREC CD (JAFFRE, YANN 41 RUE MARTI CLICHY CEDE PD (BOINAY, VINCI 41 RUE MARTI CLICHY CEDE ST (TREMBLEY, S	g Trust Fund Contribution (). FTORS:) Delete RE #92117 X.,) Delete ENT E #92117 X,) Delete TEVEN GOON DR,#500	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN TREMBLEY ST 04/19/2007

() Delete

41 RUE MARTRE #92117

ANAVI, MORIS

CLICHY CEDEX,

() Change () Addition