2007 FOR PROFIT CORPORATION

Feb 12. 2007 08:00 AM te

ANNUAL REPORT				1 CD 12, 2007 00:00		
1. Entity Nan	MENT # P930000797 WORK CORP.	'63			Seci	retary of Sta
6491 NW 112TH PL 64		Aailing Address 6491 NW 112TH PL MIAMI, FL 33178 US		- - 	1818 8 1112 8811 88111 88116 88111 1	OPIR INIII KANJA BISAN INJANI JI JANI
DO NOT WRITE IN THIS SPA			CE	02072007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For		
				65-0451		Not Applicable \$8.75 Additional Fee Required
POZA, JO 6491 NW MIAMI, FL	112TH PL	S. S. Mariner	4	NOT WRI HIS SPAC	·	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered gent. SIGNATURE Signature required when reinstating) Signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				.00 May Be ed to Fees		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P POZA, JOSE LUIS 6491 NW 112TH PL MIAMI, FL 33178 VPS POZA, NANCY 6491 NW 112TH PL MIAMI, FL 33178	RECTORS			U0000063 02/21/07-80	3915 082-003 150.00
NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRI HIS SPAC	*
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 11 if changed, or on an attachment with a statute of the component of the receiver of the re

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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