## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Jan 25, 2008 08:00 AN Secretary of State DOCUMENT # P94000037457 CIELA INVESTMENTS, INC. Principal Place of Business Mailing Address 4505 W FLAGLER ST 4505 W FLAGLER ST #102 #102 MIAMI, FL 33134 US MIAMI, FL 33134 US 01212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0491300 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent JIMENEZ, JUAN DO NOT WRITE 4505 W FLAGLER ST #101 IN THIS SPACE MIAMI, FL 33134 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 agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE JIMENEZ, JUAN F. NAME STREET ADDRESS 4505 W. FLAGLER STREET, #102 CITY-ST-ZIP MIAMI, FL 33134 U00000798496 TITLE DS 01/30/08-80030-015 150.00 JIMENEZ, GRACIELA NAME STREET ADDRESS 4505 W FLAGLER ST, #102 CITY-ST-ZIP MIAMI, FL 33134 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 10 or Block 11 if changed, or on an affactment with an address, with all other like perpowered.

SIGNATURE: X

TITLE NAME STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUAN JIMENEZ, DIR. 1/21/08

Daytima Phone #