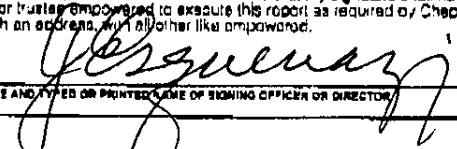


FILED
Apr 30, 2007 08:00 AM
Secretary of State

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000046505		
1. Entity Name NEW SUCCESS, INC.		
Principal Place of Business 1852 N.W. 20TH STREET MIAMI, FL 33142	Mailing Address 1852 N.W. 20TH STREET MIAMI, FL 33142	
DO NOT WRITE IN THIS SPACE		
		04272007 No Chg-P CR2E034 (11/05)
		4. FEI Number 65-0502004
		Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$5.75 Additional Fee Required
6. Name and Address of Current Registered Agent ESQUENAZI, JOSE 1852 NW 20TH ST MIAMI, FL 33142		DO NOT WRITE IN THIS SPACE
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, the registered agent.		
SIGNATURE _____ Signature of typed or printed name of registered agent and the filer (if different) (NOTE: Registered Agent signature required when changing) _____ DATE _____		
FILE NUMBER FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	1. PS ESQUENAZI, JOSE 1852 NW 20TH ST MIAMI, FL 33142	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	2. S ESQUENAZI, REBECA 1852 NW 20TH ST MIAMI, FL 33142	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-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		
SIGNATURE:  _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		