## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000057485

4332 NW 114TH PATH

MIAMI, FL 33178

Address: City-St-Zip:

Entity Name: PROVINCIAL ENTERPRISES, INC.

FILED Jan 30, 2008 Secretary of State

y	THE THE THE						
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
400 S DIXI CORAL GA	E HWY. ABLES, FL 33146	US	13736 NOF MIAMI, FL	RTH KENDAL 33186 US			
Current Mailing Address:			New Maili	New Mailing Address:			
400 S DIXIE HWY. CORAL GABLES, FL 33146 US				13736 NORTH KENDALL DRIVE MIAMI, FL 33186 US			
FEI Number:	: 65-0518288 FE	Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status De	sired()	
Name and	Address of Curre	nt Registered Agent:	Name and	Name and Address of New Registered Agent:			
	ALEJANDRA 114TH PATH 33178 US						
	named entity subme of Florida.	nits this statement for the p	ourpose of changing it	ts registered	office or registered age	nt, or both,	
SIGNATU	RE:						
	Electronic Si	gnature of Registered Age	ent		Date		
Election Car	mpaign Financing Trus	st Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () Delet GORRIN, JUAN 10574 NW 51ST ST MIAMI, FL 33178	te	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	EVP () Delet GORRIN, ALVARO 400 S DIXIE HWY CORAL GABLES, FL		Title: Name: Address: City-St-Zip:	SVP (2 GORRIN, ALE 4332 NW 114 MIAMI, FL 33	TH PATH		
Title: Name:	SVP (X) Dele GORRIN, ALEJANDR		Title: Name:	(	) 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.

Address:

City-St-Zip:

SIGNATURE: ALVARO GORRIN EVP 01/30/2008