

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000088442

Entity Name: NATY ENTERPRISES, INC.

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

3028 NW 13 STREET
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

3028 NW 13 STREET
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-0543898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, OLGA M
501 SW 39 AVE.
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: GARCIA, WILFREDO JR
Address: 3028 NW 13 STREET
City-St-Zip: MIAMI, FL 33125

Title: VD () Delete
Name: GARCIA, EVELIO
Address: 3028 NW 13 STREET
City-St-Zip: MIAMI, FL 33125

Title: P () Delete
Name: RUIZ, OLGA M
Address: 501 SW 29 AVE.
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: OLGA RUIZ

D

04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date