


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # P95000021800	
1. Entity Name MEGAPOLIS, CORP.	

Principal Place of Business 180 ISLAND DRIVE KEY BISCAYNE, FL 33149	Mailing Address 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
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04112008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0773952	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MARTINEZ-MIYASHIKI, FRANCISCO M 555 NE 15TH STREET SUITE # 934 MIAMI, FL 33132

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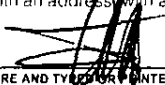
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD VILLALIBRE, ANGELA 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD MARTINEZ, FRANCISCO 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V MIYASHIKI, EVA 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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05/06/08-80070-012 150.00

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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 attachment with an address with all other like empowered.	
SIGNATURE:  FRANCISCO MARTINEZ -C	4/16/08 (305) 571-5050
<small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>