2007 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

FILED May 01, 2007 08:00 AM Secretary of State

	ANNUAL RE			
DOCUMENT#	P96000048813	_	; · (F-	

1. Entity Name ALDAJO INC.



Principal Place of Business

Mailing Address

14720 NW 24 CT

OPKA LOCKA, FL 33054

14720 NW 24 CT

OPKA LOCKA, FL 33054 US



No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0671084

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CABALLERO, DANIEL

1500 W. 7 HIALEAH,	6 ST FL 33014			Section of the Sectio	THIS SPACE
	e named entity submits this statement for the p tions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. {NOTE: Registered	Agent signature	required when reinstaling)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	1 300		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABALLERO, DANIEL 1500 W 76TH STREET HIALEAH, FL 33014				UQQQQQ753267 05/22/07=0015=003:150.00
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NAME STREET ADDRESS CITY-ST-ZIP				er gjir Sali (sam 17. rjul je	
TITLE NAME STREET ADDRESS					

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 furstee 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.

CITY-ST-ZIP