2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 17, 2008 08:00 A Secretary of State **DOCUMENT # P96000079966** 1. Entity Name AVA PAULA, INC. Principal Place of Business Mailing Address 139 MADRANA DR 139 MADRANA DR EUSTIS, FL 32726 US EUSTIS, FL 32726 No Chg-P CR2E034 (11/05) 03032008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3406577 Not Applicable \$8,75 Additional 5. Certificate of Status Desired . Alfrica and Market malatific or all from the first of the engineering the contract of the co 8. Name and Address of Current Registered Agent SWIGERT, BRETT L PA DO NOT WRITE 531 N BAY STREET EUSTIS, FL 32726 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered egent and title if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. Call Bull Carrier carrier (and the burn being the plantings), yet TITLE AGAIBI, GEORGE NAME Bride oan dari karan karan baran STREET ADDRESS 139 MADRONA DRIVE oneti nesti nije i jelegi kepuloga visa jejega pije CITY-ST-ZIP **EUSTIS, FL 32726** 04/02/08-80029-019-150-00 TITLE AGAIBI, ASHEIA NAME 139 MADRONA DRIVE de William des Charles de Language de Ladings de STREET ADDRESS EUSTIS, FL 32726 CITY-ST-ZIP k ki ak wasan kaman kaman in inganin malika TITLE Birokeroprovi divoristrije iškolji did otje opoje jeje da AGAIBI, ARMIA R. NAME 139 MADRONA DR STREET ADDRESS DO NOT WRITE CITY-ST-ZIP EUSTIS, FL 32726 IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP die de de la companie TITLE dal erakelisakelerak sakelerake baker yaya eraker yay NAME STREET ADDRESS

12. Thereby 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

CITY-ST-7IP

NAME OF SIGNING OFFICER OR DIRECTOR

Asheia Agaibe

383-0564 (352)

Date

Daytime Phone #

FILED