

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081462

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: REMOLINA & ASSOCIATES, INC.

## Current Principal Place of Business:

WYNDHAM RESORT-LOWER LEVEL-GUICAN  
4833 COLLINS AVENUE  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

MIAMI BEACH RESORT & SP-LOWER LEVEL-GUICAN  
4833 COLLINS AVENUE  
MIAMI BEACH, FL 33140

## Current Mailing Address:

1222 N.E 37 TH PLACE  
HOMESTEAD, FL 33033

## New Mailing Address:

1232 N.E 37 TH PLACE  
HOMESTEAD, FL 33033

FEI Number: 65-0704412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REMOLINA, MAURICIO  
WYNDHAM RESORT-LOWER LEVEL-GUICAN  
4833 COLLINS AVENUE  
MIAMI BEACH, FL 33140 US

## Name and Address of New Registered Agent:

REMOLINA, MAURICIO  
MIAMI BEACH RESORT & SP-LOWER LEVEL-GUICAN  
4833 COLLINS AVENUE  
MIAMI BEACH, FL 33140 US

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:

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REMOLINA, MAURICIO  
Address: 4833 COLLINS AVE GUICAN LOWER LEVEL  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD ( ) Delete  
Name: LOZADA, ERIKA  
Address: 1222 N.E 37 TH PLACE  
City-St-Zip: HOMESTEAD, FL 33033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: REMOLINA, MAURICIO  
Address: 4833 COLLINS AVE - LOWER LEVEL GUICAN  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD (X) Change ( ) Addition  
Name: LOZADA, ERIKA  
Address: 1232 N.E 37 TH PLACE  
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the 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: MAURICIO REMOLINA

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date