

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028883

FILED
Apr 30, 2007
Secretary of State

Entity Name: ESTRELLA MORENA FLAMENCO CORP.

Current Principal Place of Business:

8410 W FLAGLER ST., SUITE 115B
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8410 W FLAGLER ST., SUITE 115B
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0222644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZORILLA, LOUISE
8410 W FLAGLER ST., SUITE 115B
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

ZORRILLA, LOUISE
8410 W FLAGLER ST., SUITE 115B
MIAMI, FL 33144 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: LOUISE ZORRILLA

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ZORRILLA, LOUISE
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

Title: VSD () Delete
Name: ZORRILLA, JOSE D
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LOUISE ZORRILLA

PTD

04/30/2007

Electronic Signature of Signing Officer or Director

Date