2008 FOR PROFIT CORPORATION

FILED Mar 07, 2008 08:00

	ANNUAL	* **		TAT6	Secretary of Sta
1. Entity Nan	MENT: # P970000527 s to go, INC.	735			Secretary of Sta
F 7466661X	3 10 GO, INO.				
'	e of Business	Mailing Address			
370 N SEAB N MIAM! BC	OARD RD 1, FL 33169 US	370 N SEABOARD RD N MIAMI BCH, FL 33169	US	1 PROGRAM OF SEAL SEAL ROLL SOME	
				01212008 No Chg-P	CR2E034 (11/05)
	O NOT WRITE	IN I HIS SP/	AUE :	4. FEI Number 65-0763262	Applied For Not Applicable
				5. Certificate of Status Desired	\$8.75 Additional Fee Required
	8. Name and Address of Current Ro	egistered Agent			
), RIGOBERTO ABOARD RD			DO NOT V	VRITE
	3CH, FL 33169			IN THIS S	PACE
	named entity submits this statement for titions of registered agent.	he purpose of changing its regis	tered office or registered	d agent, or both, in the State of	Florida, I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title fappicable, (NOTE: Regi	tered Agent agnature required w	hen reinstating)	DATE
en	E NOW!!! FEE IS \$150.00	9. Election Campaign Fi	nancing \$5.0	May Be	
	ay 1, 2008 Fee will be \$550.00		on Added	d to Fees	, jû
10.	OFFICERS AND DI	IRECTORS			
TITLE NAME	PVTS LESTEIRO, RIGOBERTO				
STREET ADDRESS	1420 S.W. 102ND PLACE				
CITY-ST-ZIP	MIAMI, FL 33174			, UQOQQ	0850076 -80048-017 150:00
title Name				``````````````````````````````````````	~800 4 8~016,1 50.00
STREET ADDRESS					
CITY-ST-ZIP TITLE					
NAME					
STREET ADDRESS City-St-Zip	,			DO NOT V	VRITE
TITLE				IN THIS S	. 256-44 (1.184 N.) 300,000 (2.164 PM) (800 JM)
NAME					PACE
STREET ADDRESS CITY+ST+ZIP					
TITLE	•				
NAME					
STREET ADDRESS	•				
CITY-ST-ZIP				ð í rógraði	
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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 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.

CITY-ST-ZIP

SIGNATURE: **②**

3 4 08 (303 124-0303