## 2007 FOR PROFIT CORPORATION

**FILED** May 04, 2007 08:00 A Secretary of State

ANNUAL REPORT		
EPDVNFOU!\$ P970 2/ Entity Name MANSUR EQUITIES CORPO		
Principal Place of Business	Mailing Address	
2228!TD FOOMSEIES.W DBQLWB!QW44: 35	986(CPSU (N.D. J-BC)B/R/ TV.LF!4731 D.J.DH-P:J.MI71722	OAF (

03292007 Op!Di h.Q DS3F145!)22016\* EP OPUX SJUF JO UI JT TOBDF Applied For 5/ FEI Number 58-2364045 Not Applicable %9/86 Beejypobm 6/ Certificate of Status Desired Off (Sfrvjale 7/ Obn f !boe!Beesftt lpgDvssfodSfhjt uf sfe!Bhfou MANSUR, EB EP OPUXSUF! 1117 SCHEFFLERA DRIVE CAPTIVA, FL 33924 JO UI JT TOBDF 9/ 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE : / Election Campaign Financing %6/11 NbzlCt I FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Beef elip!Offt After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS MANSUR, E.B. 1117 SCHEFFLERA CAPTIVA, FL 33924 U00000761176 05/25/07-80045-013 150.00 EP OPU X S.UF! JO UI JT TOBDF

23/ Thereby certify that the information supplied with this filling 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.

21/

TITLE NAME

STREET ADDRESS

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CITY ST-ZIP

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