2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2007 08:00 A Secretary of State

ANNUAL REPORT				Apr 11, 2007 00			
1. Entity Nan	MENT # P9800001180			Sec	retary of S		
Principal Place 8951 SW 19 MIAMI, FL 3	2ND DR	Mailing Address 8951 SW 192ND DR MIAMI, FL 33157					
						E034 (11/05)	
E	O NOT WRITE I	N THIS SPA	CE	4. FEI Number 65-0810434		Applied For	
				5. Certificate of State		\$8.75 Additional Fee Required	
	6. Name and Address of Current Regi	stered Agent	23 7.48	动歌 [28] [1] [1]	就是"特別權法"	"二、大小海外海。""高"为	
GOLDMAI 8951 SW MIAMI, FL	192ND DR			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	OT WRIT S SPAC		
SIGNATURE	Signature, typed or printed name of registered agent and title E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution.		when reinstating) 00 May Be and to Fees	DATE	, of the state of	
10.	OFFICERS AND DIRE	CIORS	्राहुः का दुर्ग स्टब्स् विकास	Appelied State of the Control of the Control	ANTON ANT BAR EST	. Laria topores - Carreta	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT GOLDMAN, DALE 8951 SW 192ND DR MIAMI, FL 33157	(1003					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS COLE, SYBIL 8951 SW 192ND DR MIAMI, FL 33137						
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO NO	T WRIT	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THI	S SPAC	Ē	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					. U <u>dog</u> eo700s	56 7-014 150,00 ;	
TITLE			SECTION OF THE		#//2U/U/158003	7-U14-150.00	

12. I hereby 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.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OF SHANTED NAME OF SIGNING OFFICER OR DISECTOR

3/3/07

305.238-736

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