2007 FOR PROFIT C ORATION DOUGLE OF ANNUAL RENDERT GEORGETOWN MONTGAG Coral Cables F. 33146-3019 Principal Place of Business 1550 Modruga Ave, ste. 403 A. de Goylisolo P.A. DO NOT WRITE IN THIS SPACE 4. FEI Number 65082822 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent A. de Goytisolo P.A. · : DOMOT-WRITE 1550 Madruga Ave. ste. 403 Coral Gables FL 33146-3019 INSTHISESPACE 8. 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. 700103197167 05/24/07--01026--010 \*\*150.00 Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE D-P/T AGNISTING . d. GOYTISON STREET ADDRESS Same Eddora CITY-ST-ZIP NAME Ade Groy trulo STREET ADDRESS CITY-ST-ZIP NAME Sylvia J. C. GOY 155000 STREET ADDRESS CITY-ST-ZIP N.THIS: SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 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 appears mith all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/07 668-9795