## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000053621

Name:

Address:

City-St-Zip:

GOMEZ, MARIA

8530 NW 52ND ST

LAUDERHILL, FL 333514833

Entity Name: LATIN BEAT DANCE STUDIOS, INC.

FILED Jul 20, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8530 NW 5 LAUDERH	2ND ST ILL, FL 33351	4833 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX 25607 FORT LAUDERDALE, FL 333205607 US			8530 NW 52ND ST LAUDERHILL, FL 333514833 US		
FEI Number:	65-0847354	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
GOMEZ, GABRIEL R 8530 NW 52ND ST LAUDERHILL, FL 333514833 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.					
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive the prior notice.		
	AND DIREC	- ' '	ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD ( GOMEZ, GABF 8530 NW 52NI LAUDERHILL,	) ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( GOMEZ, ANGE 8530 NW 52NI LAUDERHILL,	) ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	T (	) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GABRIEL R. GOMEZ PSD 07/20/2007