2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2007 08:00 AM Secrétary of State

DOCUMENT # P98000 1. Entity Name PERU NET CORP.	0095413	
Principal Place of Business	Mailing Address	
14936 SW 104 STREET STE 23 23	N14936 SW 104 STREET STE 23 23	
MIAMI, FL 33196	MIAMI, FL 33196	

5. Name and Address of Current Registered Agent



CR2E034 (11/05)

Fee Required

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE 4. FEI Number 36-4295571 \$8.75 Additional 5. Certificate of Status Desired

No Chg-P

01052007

RIOS, RAFAEL 14936 SW 104 ST #23 MIAMI, FL 33196

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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.						
SIGNATURE_	Signature, typed or printed name of registered agent and little	rf applicable. (NOTE Registered	Agent signature	required when rainstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD RIOS, RAFAEL 14936 SW 104 STREET STE 23 MIAMI, FL 33196				MAAAAAAAAA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD DESOSA, JUAN 4775 COLLINS AVE, STE 504 MIAMI BEACH, FL 33140				000000660050 03/19/07-80011-009 150.0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME .STREE1 ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME 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 a n 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, withyall other like empowered.						