

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90204 027 ***150.00

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01112007 Chg-P CR2E034 (12/06)

DOCUMENT # P98000103449			
1. Entity Name 777 INTERNATIONAL MALL, INC.			
Principal Place of Business 145 E FLAGLER ST C-5 MIAMI, FL 33131 US		Mailing Address 130 E. FLAGLER ST C-5 MIAMI, FL 33131 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>145 E FLAGLER ST</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>C-5</i>	
City & State		City & State <i>Miami FL</i>	
Zip	Country	Zip	Country
		<i>33131</i>	<i>US</i>
4. FEI Number 65-0880983		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
AVNRI, MARLON 6 S. HIBISCUS DR. MIAMI BEACH, FL 33139		Name <i>MARLON M. AVNERI</i>	
		Street Address (P.O. Box Number is Not Acceptable) <i>6 S HIBISCUS DR</i>	
		City <i>Miami Beach</i>	
		FL Zip Code <i>33139</i>	
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 <i>[Signature]</i>		MARLON M. AVNERI 1-11-07 (NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AVNRI, MARLON 6 S HIBISCUS DR MIAMI BCH, FL 33139 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARLON M. AVNERI <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i>		MARLON M. AVNERI 1/11/07 305 3791926 Date Daytime Phone #	