## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 19, 2007 08:00 A Secretary of State

1. Entity Nam	MENT # P990000001			Sec	rétary of Sta	
Principal Place 411 PALM AI HIALEAH, FL	VE	Mailing Address 3122 W. 69 PL HIALEAH, FL 33018				
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				01112007 No Chg-P CR2E034 (11/05)  4. FEI Number 65-0889159		
FIDALGO, 3122 W. 69 HIALEAH,		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 of purised name of registered agent of title of apparature agent of the signature required when refresating)  DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees						
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIDALGO, MERCEDES 3122 W. 69 PL HIALEAH, FL 33018	RECTORS			U00000593 01/22/07-800	980 54-003 150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					IOT WRIT IIS SPAC	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				•		
NAME STREET ADDRESS CITY-ST-ZIP	spelfy that the information of the Bod Control	in Films door not qualify for the	amations assertion	in Charter 120 Fi	orida Statutas I Sunta -	arrify that the information
12. Thereby 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 courate 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: Africades FidalGo Official Statutes and the information indicates and that my name appears in Block 10 or Block 11 if changed.						
SIGNATURE: //ERCEGES 47 CGF1C00  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Date						