2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

ED MAINE OF SIGHING OFFICER OR DIRECTOR

SIGNATURE:

Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # P99000056241** THE ROBLEDO'S INC. Principal Place of Business Mailing Address 1501 N.E. 191TH STREET, STE. 405 1501 N.E. 191TH STREET, STE. 405 N.MIAMI BEACH, FL 33179 N.MIAMI BEACH, FL 33179 CR2E034 (11/05) No Chg-P 04242008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0926698 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PICHAUD, CAROLINA DO NOT WRITE 1501 N.E. 191TH STREET STE 405 N.MIAMI BEACH, FL 33179 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 (NOTE: Registered Agen) signature required when reinstating) ed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 000000928595 10. US/21/08-80036-024 150.00 TITLE PICHAUD, CAROLINA NAME STREET ADDRESS 1501 N.E. 191TH STREET STE 405 CITY-ST-ZIP N. MIAMI BEACH, FL 33179 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby 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 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

FILED