2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 09, 2007 08:00 AM Secretary of State

DOCUMENT # P99000064009 1. Entity Name BEATRIZ M. BRITO, P.A.			Secretary of State		
Principal Place of Business 1138 OBISPO AVE CORAL GABLES, FL 33134 Mailing Address 1138 OBISPO AVE CORAL GABLES, FL 33134				- 	
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				01302007 4. FEI Numb 65-093	
BRITO, BEATRIZ M P.A. 1138 OBISPO AVE CORAL GABLES, FL 33134			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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWI!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees	U00000629407 02/16/07-80055-022 15000
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP BRITO, BEATRIZ M 1138 OBISPO AVE CORAL GABLES, FL 33134	CTORS			NOT WRITE THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6				,

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 accurage 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 trosted 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:

YPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-)-07 4305582747