


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # S56635		
1. Entity Name DEBWAY, CORPORATION		
Principal Place of Business 2343 W 76TH STREET HIALEAH, FL 33016 US	Mailing Address 2343 W 76TH STREET HIALEAH, FL 33016 US	



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0274471	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent VITALE, GESUALDO 2343 W 76TH STREET HIALEAH, FL 33016
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**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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VITALE, GESUALDO 2343 W 76 STREET HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VITALE, PATRIZIA 2343 W 76 STREET HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VITALE, ROSANNA 2343 W 76 STREET HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MONAHAN, MARIANA E 2343 W 76 STREET HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **MARIANA E. MONAHAN** 01-08-2008 (305)818-6353
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #