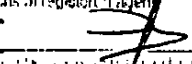
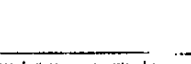


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90053 017 ***150.00

DOCUMENT # V30029		05-03-2007 90053 017 ***150.0	
1. Entity Name: GARMES INTERNATIONAL CORP.			
2. Principal Place of Business (Not P.O. Box #) 7740 SW 89TH AVE MIAMI, FL 33173 US		3. Mailing Address: 7740 SW 89TH AVE MIAMI, FL 33173 US	
4. F.P. Number: 65-0344269		5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent: GARCIA, CARLOS 3921 NW 5TH STREET MIAMI, FL 33128		7. Name and Address of New Registered Agent: Vera, Heidy 7740 SW 89th Ave Miami, FL 33173	
8. The above information is submitted 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.			
9. Signature: 		10. Signature: 	
11. FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		12. \$5.00 May Be Added to Fees	
13. OFFICERS AND DIRECTORS		14. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
15. PSTD GARCIA, CARLOS 3921 NW 5TH STREET MIAMI, FL 33128		16. P Vera, Heidy 7740 SW 89th Ave Miami, FL 33173	
17. VP VERA, HEIDY 7740 SW 89TH AVE MIAMI, FL 33173		18. Change ☒ Addition ☐	
19. Director ☐		20. Change ☐ Addition ☐	
21. Director ☐		22. Change ☐ Addition ☐	
23. Director ☐		24. Change ☐ Addition ☐	
25. Director ☐		26. Change ☐ Addition ☐	
27. 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 included 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 appointed to execute this report as required by Chapter 632, Florida Statutes, and that my name does not appear in Book 16 of the Book 11 of the			
28. SIGNATURE: 		29. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	