2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V54403

1. Entity Name

THE BERNIE ORGANIZATION, INC.



FILED Apr 27, 2007 08:00 Al Secretary of State

Principal Place of Business

15030 COCONUT AVENUE HIALEAH, FL 33014

Mailing Address

15030 COCONUT AVENUE HIALEAH, FL 33014



CR2E034 (11/05)

Fee Required

Daytime Phone #

DO NOT WRITE IN THIS SPACE

4. FEI Number	 Applied For	
65-0355116	 Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional	

6. Name and Address of Current Registered Agent

MARIBONA, BERNARDO PRES. 15030 COCONUT AVE HIALEAH, FL 33010

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

04232007

	named entity submits this statement for the pons of registered agent.	urpose of changing its registere	d office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_					
SIGNATORE	Signature, typed or printed name of registered agent and little	applicable (NOTE Registered	Agent signature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financ Trust Fund Contribution.	cing \$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MARIBONA, BERNARDO PRES. 15030 COCONUT AVE MIAMI LAKES, FL 33014			U00000737330 05/11/07-80022-024 150.00	
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-S1-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			s he	が、	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			the second secon	<u> </u>	
12. I nereby 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 suppliemental 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 attaching flying an address, with all other like empowered.					

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR