

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V59377

FILED  
Apr 17, 2007  
Secretary of State

Entity Name: PRADO ENTERPRISES, INC.

## Current Principal Place of Business:

3820 NORTHDAL BLVD  
SUITE 107A  
TAMPA, FL 33624 US

## New Principal Place of Business:

## Current Mailing Address:

3820 NORTHDAL BLVD  
SUITE 107A  
TAMPA, FL 33624 US

## New Mailing Address:

FEI Number: 59-3137898      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLS, FREDERICK J  
MORRISON & MILLS PA  
1200 W PLATT ST, SUITE 100  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: PRADO, JUAN C  
Address: 6712 ROSE LEA CR.  
City-St-Zip: LUTZ, FL 33558

Title: VD ( ) Delete  
Name: PRADO, JENIFER Z  
Address: 6712 ROSE LEA CR.  
City-St-Zip: LUTZ, FL 33558

Title: T ( ) Delete  
Name: ROMER, JOHN A III  
Address: 7033 PELICAN IS DR  
City-St-Zip: TAMPA, FL 33634

Title: V ( ) Delete  
Name: DEL CUETO, JUAN  
Address: 15129 SPRINGVIEW  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: ROMER, ANTHONY J III  
Address: 17320 LINDA VISTA CIRCLE  
City-St-Zip: LUTZ, FL 33548

Title: V (X) Change ( ) Addition  
Name: DEL CUETO, JUAN I  
Address: 15129 SPRINGVIEW  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. JOHN ROMER, III

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04/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date