


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State


DOCUMENT # F05000004590

1. Entity Name
 280 CARABELA INC.



Principal Place of Business BECKER, GLYNN, MELAMED & MUFFLY, LLP 299 PARK AVENUE NEW YORK, NY 10171	Mailing Address BECKER, GLYNN, MELAMED & MUFFLY, LLP 299 PARK AVENUE NEW YORK, NY 10171
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DO NOT WRITE IN THIS SPACE



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3308851	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 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 BAILLERES DE HEVIS, MARIA TERESA MOLIERE 222 TORRE DE OFICINAS PISO 6 11540 MEXICO, DF MEXICO,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MUFFLY, ROBERT C 299 PARK AVENUE NEW YORK, NY 10171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KHATCHIKIAN, CARIN V 299 PARK AVENUE NEW YORK, NY 10171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEVIA, GONZALO MOLIERE 222 TORRE DE OFICINAS PISO 6 11540 MEXICO, DF MEXICO,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/31/08-80015-009 150.00

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:  **Robert C. Muffly, Secretary** **January 16, 2008** **212-888-3033**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #