

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # K49791

1. Entity Name
CAMUTO, INCORPORATED



Principal Place of Business
**2030 NW 94TH AVENUE
MIAMI, FL 33172**

Mailing Address
**2030 NW 94TH AVENUE
MIAMI, FL 33172**



01262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0109433

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VELEZ, JAVIER
2800 N.E. 48 COURT
LIGHTHOUSE POINT, FL 33064**

**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

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
**P
VELEZ, JAVIER
2800 NE 48 COURT
LIGHTHOUST POINT, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
VELEZ, LUIS FERNANDO
CR4 41#46.137 ITS GUI
ANTIOQUIA, COLOMBIA,**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
VELEZ, CLEMENCIA
AV. NUTIBARA #74A4
COLOMBIA,**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000808953
02/08/08-80003-001-150.00

**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

120162 U6 h/h

1-28-08

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