

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90031 002 ***150.00

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01182005 Chg-P CR2E034 (10/03)

4. FEI Number **59-2504584** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, NEMESIO
2110 NW 23 AVE.
MIAMI, FL 33142

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, NEMESIO 4050 S.W. 2ND TERRACE MIAMI, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rodriguez, Nemesio 44 NW 59th Court Miami, FL 33126 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSV RODRIGUEZ, BELEN L. 4050 S.W. 2ND TERRACE MIAMI, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Rodriguez, Belen 44 NW 59th Court Miami, FL 33126 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MIGUEL, RODRIGUEZ 4050 SW 2ND TERR MIAMI, FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Rodriguez, Alberto 2110 NW 23rd Avenue Miami, FL 33142 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Lorenzo, Belen M. 4050 SW 2nd Terrace Miami, FL 33134 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Belen L. Rodriguez Vice-President 1/18/05 (305) 634-3415

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #