

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2005 8:00 am
Secretary of State

08-29-2005 90145 042 ***550.00

DOCUMENT # P01000080525

1. Entity Name
17149 CORPORATION



Principal Place of Business
**155 OCEAN LANE DRIVE, #1105
KEY BISCAYNE, FL 33148**

Mailing Address
**155 OCEAN LANE DRIVE, #1105
KEY BISCAYNE, FL 33148**

50063828



2. Principal Place of Business

3. Mailing Address

4. State of Florida

5. State of Florida

08032005

Chg-P

CR2E034 (10/03)

City or State

City or State

65-1131670

App. Fee
Paid App. Fee

Zip

Country

Zip

Country

5. Declaration of Principal Director

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALVARO CASTILLO & P.A.
1390 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131**

Name

Street Address (P.O. Box is acceptable for Agent only)

City

FL

Zip Code

8. The above information is submitted for the purpose of filing in to register as officer or registered agent, or both, in the State of Florida. I am hereby making and adopting this declaration of registration.

SIGNATURE

[Signature]

[Signature]

8-29-05

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Electronically Filed
Trust Fund Certificate

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONAL CHARGES TO OFFICERS AND DIRECTORS

NAME	D	☐ Officer
NAME	MANCINI DE CAMPBELL, LAURA	
STREET ADDRESS	155 OCEAN LANE DRIVE, #1105	
CITY	KEY BISCAYNE, FL 33149	
NAME	D	☐ Officer
NAME	CAMPBELL, FERNANDO	
STREET ADDRESS	155 OCEAN LANE DRIVE, #1105	
CITY	KEY BISCAYNE, FL 33149	
NAME	S	☐ Officer
NAME	CASTILLO, ALVARO	
STREET ADDRESS	1390 BRICKELL AVENUE #200	
CITY	MIAMI, FL 33131	
NAME		☐ Officer
NAME		
STREET ADDRESS		
CITY		
NAME		☐ Officer
NAME		
STREET ADDRESS		
CITY		

NAME		☐ Officer	☐ Agent
STREET ADDRESS			
CITY			
NAME		☐ Officer	☐ Agent
STREET ADDRESS			
CITY			
NAME		☐ Officer	☐ Agent
STREET ADDRESS			
CITY			
NAME		☐ Officer	☐ Agent
STREET ADDRESS			
CITY			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(3)(b), Florida Statutes. I further certify 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 of this report.

SIGNATURE:

[Signature]

Fernando Campbell / Director

305 371-5546

SIGNATURE AND TYPED OR PRINTED NAME OF DESIGNEE OFFICER OR DIRECTOR