


FILED
May 05, 2005 8:00 am
Secretary of State

02-21-2005 90060 008 ***100.00
 03-18-2005 90067 039 *****50.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

3
22

DOCUMENT # P04000006461			
1. Entity Name VELMAR INVESTMENT, INC.			
Principal Place of Business 1331 BAYVIEW CIRCLE WESTON, FL 33326		Mailing Address 1331 BAYVIEW CIRCLE WESTON, FL 33326	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-0602162		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		7. Name and Address of New Registered Agent	
Name VELASCO, MIRIAM F		Name	
Street Address (P.O. Box Number is Not Acceptable) 1331 BAYVIEW CIRCLE		Street Address (P.O. Box Number is Not Acceptable)	
City WESTON, FL 33326		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 _____ DATE _____ <small>Signature, based on printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST VELASCO, MIRIAM F 1331 BAYVIEW CIRCLE WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 its 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: <u>Miriam Velasco</u>		Date: <u>11-15-05</u> / <u>1954-349-92-72</u> / <u>954-326-6878</u>	

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01202005 Chg-P CR2E034 (10/03)

4. FEI Number **20-0602162** Applied For Not Applicable

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

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7. Name and Address of New Registered Agent

VELASCO, MIRIAM F
1331 BAYVIEW CIRCLE
WESTON, FL 33326

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

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