

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90034 015 ***150.00

DOCUMENT # P96000008373

1. Corporation Name
1040 I.T.S., INC.



Principal Place of Business
12490 NE 7TH AVE
SUITE 217
NORTH MIAMI FL 33161
US

Mailing Address
P.O. BOX 997087
SUITE 104
NORTH MIAMI FL 33299
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1996

4. FEI Number

65-0635938

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 12488 NE 7TH AVE

Suite, Apt. #, etc.

22

2a. Mailing Address

26 P.O. Box 997087

Suite, Apt. #, etc.

27

City & State

23 North Miami FL

City & State

28 Miami FL

Zip

24 33161

Country

25 USA

Zip

29 33299

Country

30 USA

9. Name and Address of Current Registered Agent

PADILLA, HENRY
12490 NE 7TH AVE
SUITE 217
NORTH MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name HENRY Padilla
82 Street Address (P.O. Box Number is Not Acceptable)
12488 NE 7TH AVE

83

84 City North Miami FL 85 Zip Code 33161

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-26-99

12. OFFICERS AND DIRECTORS

TITLE P
NAME PADILLA, HENRY
STREET ADDRESS 12490 NE 7TH AVE, SUITE 217
CITY-ST-ZIP NORTH MIAMI FL 33161

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P
12 NAME HENRY Padilla
13 STREET ADDRESS 12488 NE 7TH AVE
14 CITY-ST-ZIP NORTH MIAMI FL 33161

☒ Change

☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change

☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change

☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change

☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change

☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-99

305-895-3022

Date

Daytime Phone #

CR2E034 (11/98)