

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90070 023 ***150.00

24051745



04192004 Chg-P CR2E034 (10/03)

4. FEI Number
59-1724834
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, DIEGO
6890 SUNSET DR
S MIAMI, FL 33143

7. Name and Address of New Registered Agent

Name
RODRIGUEZ, DIEGO
Street Address (P.O. Box Number is Not Acceptable)
300 NORTH KROME AVE. BLDG. #9
City
FLORIDA CITY FL Zip Code
33034

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

DIEGO RODRIGUEZ, P 04/19/04

Signature, typed or printed name of registered agent and officer or director

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PV	☐ Delete
NAME	RODRIGUEZ, DIEGO	
STREET ADDRESS	6890 SUNSET DR	
CITY-ST-ZIP	S MIAMI, FL	
TITLE	VP	☐ Delete
NAME	RODRIGUEZ, DANIEL	
STREET ADDRESS	4400 GRANADA BLVD	
CITY-ST-ZIP	CORAL GABLEA, FL	
TITLE	ST	☒ Delete
NAME	PEREZ REINALDO	
STREET ADDRESS	5081 SW 96 AVE.	
CITY-ST-ZIP	MIAMI, FL	
TITLE	VP	☐ Delete
NAME	RODRIGUEZ, DIEGO D	
STREET ADDRESS	6890 SUNSET DR	
CITY-ST-ZIP	S. MIAMI, FL 33143	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Change ☐ Addition
NAME	RODRIGUEZ, DIEGO	
STREET ADDRESS	300 NORTH KROME AVE. BLDG#9	
CITY-ST-ZIP	FLORIDA CITY, FL 33034	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME	RODRIGUEZ, DIEGO D	
STREET ADDRESS	300 NORTH KROME AVE. BLDG.#9	
CITY-ST-ZIP	FLORIDA CITY, FL 33034	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

DIEGO RODRIGUEZ, P

04/19/04 305-248-5860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #