## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jul 14, 2004 8:00 am Secretary of State DOCUMENT # P03000149154 07-14-2004 90008 033 \*\*\*158.75 DOUBLE A COMMUNICATION, INC. Principal Place of Business Mailing Address 44048618 9775 NW 49TH TERR. 9775 NW 49TH TERR. MIAMI, FL 33178 MIAMI, FL 33178 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07082004 CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 57-1194257 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7."Name and Address of New Registered Agent CHAVEZ, ALEJANDRO A Street Address (P.O. Box Number is Not Acceptable) 9775 NW 49TH TERR. MIAMI, FL 33178 City Zip Code 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. 28 642 Signature, typed or printed name of registered agent and title it applicable DATE INOTE: Registered Agent aignature required when renstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. THILE Delete TITLE ☐ Change Addition CHAVEZ, ALEJANDRO NAME NAME STREET ADDRESS 9775 NW 49TH TERRS\* STREET ADDRESS MIAMI, FL 33178 CITY - ST - ZIF CITY-ST-7IP TITLE [ ] Change Addition TITLE Delete SIEBERT, MARIA A STREET ADDRESS 9775 NW 49TH TERR. STREET ADDRESS City-SI-ZiP MIAMI, FL 33178 Crity-ST-7IP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME. NAME STREET AGURESS STREET ADDRESS CiTY-ST-ZiP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition MARKE MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE THILE ☐ Change ☐ Addition Daleta NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZiP CITY-\$1-219 12. I hereby certify that the information supplied with this filling 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.

**FILED** 

07.08.2004

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Affachment 44048618

Accounting & Tax Service, Inc.

July, 8, 2004

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Double A Communication, Inc. Document no. P03000149154 2004 Profit Corporation/Annual Report

Dear Sir or Madam:

Enclosed please find:

- 1) 2004 Profit Corporation/Annual Report 2004
- 2) A check payable to the Department of State in the amount of \$158.75

We are respectfully requesting abatement of the penalties since the above corporation did not received the form at the time to file the report. This was his first year in business.

Please review the above circumstances and abate the penalty fee as Mrs. Siebert acted in good faith to try and comply with the law and he has made a commitment to make the payment of renewal timely in the future:

We thank you in advance for your cooperation in this matter and ask, if you need additional information do not hesitate to call or contact us at your earliest convenience.

Sincerely,:

Accountant

Maria A Siebert

Director.