

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 16, 2005 8:00 am**  
**Secretary of State**

02-16-2005 90052 008 \*\*\*158.75

DOCUMENT # P94000082633

1. Entity Name

ENPA V, INC.



Principal Place of Business

14317 SW 45 TERR  
NONE  
MIAMI FL 33175  
US

Mailing Address

14317 SW 45 TERR  
STE 303  
MIAMI FL 33175  
US

50016692



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

10401 SW 108 AVE

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 237

City & State

City & State

MIAMI FLA

Zip

Country

Zip

Country

33176

MIAMI DADC

4. FEI Number

65-0538254

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VELAZQUEZ, RAUL E  
14317 SW 45 TERR  
MIAMI FL 33175

Name

10401 SW 108 AVE Suite 237

Street Address (P.O. Box Number is Not Acceptable)

ENPA V

City

MIAMI FLA

FL

Zip Code

33176

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME VELAZQUEZ, RAUL E  
STREET ADDRESS 14317 SW 45 TERR.  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE  
NAME ERNESTO E. VELAZQUEZ ☒ Change ☐ Addition  
STREET ADDRESS 10401 SW 108 AVE S237 MIAMI 33176  
CITY-ST-ZIP PRESIDENT

TITLE V  
NAME PEREZ, SOFIA  
STREET ADDRESS 14317 SW 45 TERR.  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE  
NAME VICE PRESIDENT ☒ Change ☐ Addition  
NAME TANIA M. VELAZQUEZ  
STREET ADDRESS 10401 SW 108 AVE S237  
CITY-ST-ZIP MIAMI FLA 33176

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02/08/05 686-486-6900