# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 14, 2005 8:00 am**
**Secretary of State**
04-14-2005 90088 024 ***150.00

DOCUMENT # P03000093563

1. Entity Name
BANDRIK CORP.

| Principal Place of Business | Mailing Address |
|---|---|
| 15 SAMANA DR<br>MIAMI, FL 33133 | 15 SAMANA DR<br>MIAMI, FL 33133 |

04102005 Chg-P CR2E034 (10/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 6800 SW 40 Street | 6800 SW 40 Street |
| Suite, Apt. #, etc.<br>Suite 386 | Suite, Apt. #, etc.<br>Suite 386 |
| City & State<br>MIAMI FLORIDA | City & State<br>MIAMI FLORIDA |
| Zip / Country<br>33155-3708 / USA | Zip / Country<br>33155-3708 / USA |

4. FEI Number
56-2388763 ☐ 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 |
|---|---|
| BANDRICH JR., LUIS A<br>15 SAMANA DR<br>MIAMI, FL 33133 | Name<br>LUIS A. BANDRICH SR.<br>Street Address (P.O. Box Number is Not Acceptable)<br>6800 SW 40 Street Suite 386<br>City<br>MIAMI **FL** Zip Code 33155-3708 |

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 _____ LUIS A. BANDRICH SR. 04/11/2005
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**

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 / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>BANDRICH JR., LUIS A<br>15 SAMANA DR<br>MIAMI, FL 33133 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P/S/D<br>LUIS A. BANDRICH SR.<br>6800 SW 40 Street Suite 386<br>MIAMI FLORIDA 33155-3708 | ☑ 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 |
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| 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:** Luis A. Bandrich Sr. LUIS A. BANDRICH SR. PRESIDENT 04/11/2005 (305) 200-9347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #