

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90125 005 ***150.00

DOCUMENT # L22849

1. Entity Name

291 CORPORATION



Principal Place of Business

1506 SW 143 CT
MIAMI FL 33184

Mailing Address

1506 SW 143 CT
MIAMI FL 33184

2. Principal Place of Business

18397 SW 136 Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33177

Country

Zip

Country

4. FEI Number

65-0152502

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHIRINO, JUAN J.
1506 SW 143 CT
MIAMI FL 33184

7. Name and Address of New Registered Agent

Name

ANA L. HERNANDEZ

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

18397 SW 136 Ave

City

Miami

FL

Zip Code

33177

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 reappointing)

DATE

ANA L. HERNANDEZ 2-17-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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

TITLE P
NAME CHIRINO, JUAN J.
STREET ADDRESS 1506 SW 143 CT
CITY-ST-ZIP MIAMI FL 33184 ☐ Delete

TITLE S
NAME SILVA, ALBERTO
STREET ADDRESS 1506 SW 143RD CT
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE ~~T~~
NAME ~~HERNANDEZ, ANA~~
STREET ADDRESS ~~1506 SW 143 CT~~
CITY-ST-ZIP ~~MIAMI FL 33184~~ ☐ Delete

TITLE VP
NAME LUIS F. CHIRINO
STREET ADDRESS 1506 SW 143 CT
CITY-ST-ZIP MIAMI FL 33184 ☐ Delete

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
NAME CHIRINO JUAN J.
STREET ADDRESS 4797 W 10 Ave
CITY-ST-ZIP Hialeah FL 33012 ☒ Change ☐ Addition

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

TITLE ~~T~~
NAME ~~HERNANDEZ ANA~~
STREET ADDRESS ~~18397 SW 136 Ave~~
CITY-ST-ZIP ~~Miami FL 33177~~ ☒ Change ☐ Addition

TITLE VP
NAME LUIS F. CHIRINO
STREET ADDRESS 7851 NW 160 Terrace
CITY-ST-ZIP Miami Lake FL 33016 ☒ Change ☐ Addition

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 exemptions contained in Section 119, 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-06

Date

(305) 251-7410

Daytime Phone #