2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**DOCUMENT # 336085** 

SIGNATURE:

## **Secretary of State** 1. Entity Name A.E. ORTEGO CONSTRUCTION CO. Principal Place of Business Mailing Address 704 S W 17TH AVENUE 704 S W 17TH AVENUE SUITE 1 MIAMI FL 33135 US MIAMI FL 33135 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc Suite, Apt. #. etc. 1st MOORE CR2E034 (10/04) Applied For City & State 4. FEI Number City & State 59-2365576 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ORTEGO, ANTHONY E Street Address (P.O. Box Number is Not Acceptable) 704 SW 17TH AVE SUITE 1 MIAMI FL 33135 Zip Code City 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 little if applicable (NOTE: Registered Agent signature required when reinstalling) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5,00 May Be After May 1, 2005 Fee Wifl Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition STD ☐ Detete THE TITLE NAME ORTEGO, ALODIA NAM: U00000329392 13140 SW 102ND AVENUE CIRELI ADDRESS STREET ADDRESS 04/25/05-80115-016 150.00 CHY+ST-ZIP MIAMI FL 33176 ally Si-ziP ☐ Change Addition PD TITLE ☐ Delete THE ORTEGO, ANTHONY E NaME NAME STREET ADDRESS 13140 SW 102ND AVENUE STREET ADDRESS MIAMI FL 33176 C-D-ST-ZP Ciffy S1 - Ziff Addition ☐ Change TITLE ☐ Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST ZIP Addition DILE Change DILE ☐ Delete NAME NAM? STREET ADORESS STREET AUDRESS CITY ST-ZIP CITY: ST- ZIP ☐ Addition ☐ Change TITLE ☐ Delete MILE NAME NAME STREET ADDRESS STREET ADDRESS CHY ST-ZIP $CHT \cdot ST \cdot ZP'$ Addition Change TiffE ]JIII ☐ Defete NAME NAME STREET ADDRESS STHEET ADDRESS CITY-ST-ZIP CITY ST-72P 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.

my Z. Oction

**FILED** 

April 22, 2005 (305)643-2700

Apr 25, 2005 08:00 AM