

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # 366727 1. Entity Name CLAUD & FREDDY APARTMENTS, INC.					
Principal Place of Business 48 EAST FLAGLER STREET, PENTHOUSE 101 C/O LERMAN AND LERMAN, P.A. MIAMI FL 33131			Mailing Address 48 EAST FLAGLER STREET, PENTHOUSE 101 C/O LERMAN AND LERMAN, P.A. MIAMI FL 33131		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 59-1357662				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LERMAN, ISIDORO LERMAN AND LERMAN, P.A. 48 EAST FLAGLER STREET, PENTHOUSE 101 MIAMI FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (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 NAME STREET ADDRESS CITY - ST - ZIP	PD ZAROR, EMILIO 48 E. FLAGLER ST (101) MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change ☐ Addition ☐ U00000253822 03/07/05-80051-004 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LERMAN, ISIDORO 48 E. FLAGLER ST (101) MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change ☐ Addition ☐	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LERMAN, ISIDORO 48 E. FLAGLER ST (101) MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change ☐ Addition ☐	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ANANIAS, JEANETTE 48 E FLAGLER ST, SUITE 101 MIAMI FL 33131	☐ 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)(f), 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: _____ 3/1/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					