2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 24, 2006 8:00 am Secretary of State **DOCUMENT # 437657** 1. Entity Name 03-24-2006 90038 007 \*\*\*150.00 HIDALGO BUCH CORPORATION Principal Place of Business Mailing Address 199 EDGEWATER DRIVE 199 EDGEWATER DRIVE P.O. BOX 416 CORAL GABLES FL 33133-6912 P.O. BOX 416 CORAL GABLES FL 33133-6912 2. Principal Place of Business 3. Mailing Address 7310 SIN1735T. 7310 SW 173 5 Suite, Apt. #, etc 1st MOORE CR2E034 (10/05) City & State 4. FEI Number Applied For City & State 59-1720816 Fra Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired mon - Dade 3315 410001N Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HIDALGO, GEORGE 199 EDGEWATER DRIVE **CORAL GABLES FL 33133** 7311 SW1735T. 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 name of registers again and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete Change DRESIDENT ☐ Addition TITLE TITLE George Hodalgo HIDALGO, GEORGE NAME NAME 199 EDGEWATER DR. 7311 SW 1735T. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORAL GABLES FL** CITY-ST-ZIP Palmetto Bay, Fla. 33157 Delete TITLE ☐ Addition TREASURE SARA Hodalgo 1311 SKI13 ST. NAME HIDALGO, SARA NAME STREET ADDRESS 199 EDGEWATER DR. STREET ADDRESS Palmetto Bay, Fla. 33157 CITY-ST-ZIP CITY-ST-ZIP **CORAL GABLES FL** Delete TITLE TITLE SCERETARY ☐ Addition NAME NAME SARA HINDA HIDALÇO, SABA STREET ADDRESS STREET ADDRESS 199 EDGEWATER DR. 73115W17357 CITY-ST-7/P Palmetto Bay, Fla. 33,50 CITY-ST-7IP **CORAL GABLES FL** Detete TITI F ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

**FILED** 

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date District Phone #

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 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.