

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2007 08:00 AM
Secretary of State

DOCUMENT # 469304

1. Entity Name
PINE TREE HOTEL, INCORPORATED



Principal Place of Business

**2479 W. 1ST AVE.
HIALEAH, FL 33010**

Mailing Address

**2479 W. 1ST AVE.
HIALEAH, FL 33010**



03072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1838480

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**RODRIGUEZ, YFRAHIN
15651 HUNTRIDGE RD.
DAVIE, FL 33331**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000674943
03/29/07-80083-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	RODRIGUEZ, MIRTELINA
STREET ADDRESS	86 W. 25TH ST.
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VPD
NAME	RODRIGUEZ, YFRAHIN
STREET ADDRESS	15651 HUNTRIDGE RD.
CITY-ST-ZIP	DAVIE, FL 33331
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mirtelina Rodriguez
President
03/12/07

Date

305-888-2556
Daytime Phone #