

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90038 048 ***150.00

DOCUMENT # 486292

1. Entity Name

FIESTA FARMS CORPORATION



Principal Place of Business

907 CYPRESS TERRACE, APT. 206
POMPAÑO BEACH FL 33069

Mailing Address

907 CYPRESS TERRACE, APT. 206
POMPAÑO BEACH FL 33069



2. Principal Place of Business - No P.O. Box #

6501 NE 20th Terrace
Suite, Apt. #, etc.

3. Mailing Address

6501 NE 20th Terrace
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Ft. Lauderdale FL

City & State

Ft. Lauderdale FL

4. FEI Number

59-1626716

Applied For

Not Applicable

Zip

33308

Country

USA

Zip

33308

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BLANK, ROBERT ESQ.
2699 S BAYSHORE DR
7TH FLOOR
MIAMI FL 33133

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

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
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 LAWS, NANCY ☐ Delete
STREET ADDRESS 907 CYPRESS TERRACE, APT. 206
CITY-ST-ZIP POMPAÑO BEACH FL 33069

TITLE D
NAME REINALDO, SCARPETTA ☐ Delete
STREET ADDRESS CALLE 98 9-13 APT 201
CITY-ST-ZIP BOGOTA COLUMBIA

TITLE D
NAME LAWS, HAROLD ☒ Delete
STREET ADDRESS 1600 WESTWOOD DRIVE
CITY-ST-ZIP SANDPOINT ID 83864

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ Change ☒ Addition
NAME D. Fernando Ortiz
STREET ADDRESS 132 Minorca Av.
CITY-ST-ZIP Coral Gables, FL 33134

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

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mar 26 2007

954
958 2486