

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90029 007 ***150.00

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01102005 Chg-P CR2E034 (10/03)

DOCUMENT # 486946	
1. Entity Name GERARD VEGA INTERNATIONAL CORPORATION	



Principal Place of Business 6922 SUNRISE CT. CORAL GABLES, FL 33133 US	Mailing Address 6922 SUNRISE CT CORAL GABLES, FL 33133 US
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2. Principal Place of Business 740 SAN BRUNO AVE	3. Mailing Address 740 SAN BRUNO AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State CORAL GABLES, FL	City & State CORAL GABLES, FL
Zip 33143	Country USA
Zip 33143	Country USA

4. FEI Number 59-1647289	Added For ☐
	Not Applicable ☐

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
VEGA, GERARD A 6922 SUNRISE CT. CORAL GABLES, FL 33133	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

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	DATE
<i>(Signature of registered agent or registered agent and the filer)</i>	<i>(NOTE: Registered Agent signature required when changing)</i>

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE PS	☐ Delete
NAME VEGA, GERARD A	
STREET ADDRESS 6922 SUNRISE CT.	
CITY- ST- ZIP CORAL GABLES, FL	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
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	
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 exemption stated in Section 119.07(3)(c), 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	
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SIGNATURE: GERARD A. VEGA	1/13/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE