


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 20, 2005 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # 513154 1. Entry Name MENDEZ-INSUA & CO., P.A. |  |
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|---|---|
| Principal Place of Business 2911 SW 97TH AVENUE MIAMI, FL 33165-3046 US | Mailing Address 2911 SW 97TH AVENUE MIAMI, FL 33165-3046 US |
|---|---|



01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 59-1692900 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

| | |
|---|-----------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|-----------------------------------|

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| 6. Name and Address of Current Registered Agent MENDEZ-INSUA, ARISTIDES U 2911 SW 97TH AVE. MIAMI, FL 33165 |
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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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DPST MENDEZ-INSUA, ARISTIDES 2911 SW 97TH AVENUE MIAMI, FL 331653046 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V MENDEZ-INSUA, JUANA 2911 SW 97TH AVENUE MIAMI, FL 331653046 |
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01/21/05-80085-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Jan 14, 2005 305.2215661
Date Daytime Phone #

Aristides U. Mendez-Insua, P.