

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # 564004

1. Entity Name  
PRONTO DOOR & CLOSER SERVICE, INC.



Principal Place of Business

7757 N.W. 53 STREET  
MIAMI, FL 33166 US

Mailing Address

9783 S.W. 68TH ST  
MIAMI, FL 33173 US

**FILED**  
**Mar 19, 2005 08:00 AM**  
**Secretary of State**



03162005 No Chg-P CR2E034 (10/03)

4. FEI Number

59-1870627

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

RODRIGUEZ, CAMILO  
9783 SW 68 ST  
MIAMI, FL 33173

**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, 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  
P  
RODRIGUEZ, CAMILO  
9783 SW 68TH ST  
MIAMI, FL 00000,

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
S  
RODRIGUEZ, CHARILYN  
9783 SW 68TH ST  
MIAMI, FL 00000,

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 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:

*Camilo Rodriguez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-05

Date

305-5964386

Daytime Phone #