2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 622720

1. Entity Name
BEATRIZ, INC.

Principal Place of Business	Mailing Address
213 NE 97TH STREET MIAMI SHORES, FL 33138	213 NE 97TH STREET MIAMI SHORES, FL 33138

DO NOT WRITE IN THIS SPACE

02242008   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-1913630		Not Applicable

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

6. Name and Address of Current Registered Agent

HERDOCIA, ROBERTO
30 NE 103 ST
MIAMI SHORES, FL 33138

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, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	HERDOCIA, RICARDO J.
STREET ADDRESS	30 NE 103RD ST
CITY-ST-ZIP	MIAMI SHORES, FL

TITLE	ST
NAME	DE HERDOCIA, BEATRIZ O
STREET ADDRESS	30 NE 103RD ST
CITY-ST-ZIP	MIAMI SHORES, FL

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	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000859808
04/02/08-80037-018 150.00

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: _____ RICARDO HERDOCIA _____ 3/12/08 (305) 757-1873

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #