

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # 665262

1. Entity Name
RUBESA INTERNATIONAL INCORPORATED



Principal Place of Business
410 16TH ST
MIAMI BCH, FL 33139

Mailing Address
410 16TH ST
MIAMI BCH, FL 33139



01242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2084853

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DATORRE, ROBERTO
412-16TH STREET
MIAMI BEACH, FL 33139

**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 \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DV
NAME DA TORRE, PEDRO PAN
STREET ADDRESS 410 16 ST
CITY-ST-ZIP MIAMI BCH, FL 00000,

TITLE P
NAME DATORRE, ROBERTO
STREET ADDRESS 410-16TH ST
CITY-ST-ZIP MIAMI BCH, FL

TITLE T
NAME BODDING, HELMUT
STREET ADDRESS 410 16 ST
CITY-ST-ZIP MIAMI BCH, FL 00000,

TITLE SD
NAME DATORRE, TOMAS
STREET ADDRESS 410-16TH STREET
CITY-ST-ZIP MIAMI BCH, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000203595
01/29/05-80036-016 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Pedro Pan Datorre 1/25/05 305-5315493