

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90073 033 ***150.00

DOCUMENT # G59202

1. Entity Name

LIRO INTERNATIONAL, INC.



Principal Place of Business

% FELIPE LI
13930 LAKE SUCCESS PL.
MIAMI LAKES FL 33014

Mailing Address

% FELIPE LI
13930 LAKE SUCCESS PL.
MIAMI LAKES FL 33014



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/06)

Zip

Country

Zip

Country

4. FEI Number 59-2338207

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LI, FELIPE
13930 LAKE SUCCESS PL.
MIAMI LAKES FL 33014

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FELIPE LI

Signature, typed or printed name of Registered Agent, if applicable

(Not Applicable) Registered Agent's signature required when reinstating

Date

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	LI, FELIPE	
STREET ADDRESS	13930 LAKE SUCCESS PLACE	
CITY- ST- ZIP	MIAMI LAKES, FL 00000	
TITLE	S.D	<input type="checkbox"/> Delete
NAME	MARRIA, LI	
STREET ADDRESS	13930 LAKE SUCCESS PL	
CITY- ST- ZIP	MIAMI LAKES FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LI, GLADYS	
STREET ADDRESS	13930 LAKE SUCCESS PL	
CITY- ST- ZIP	MIAMI LAKES FL 33014	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	SECRETARY, DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARIA LI - MCCARTHY	
STREET ADDRESS	4787 RIDGEMOOR CIRCLE	
CITY- ST- ZIP	PALM HARBOR, FL 34685	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

FELIPE LI PRESIDENT

Date

Daytime Phone #