## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # G82386**

1. Entity Name
MUNDO PUBLISHING CORP.



FILED
Mar 23, 2007 08:00 AM
Secretary of State

Principal Place of Business

SIGNATURE:

Mailing Address

6221 NORTHWEST 179 TER, MIAMI, FL 33015 POST OFFICE BOX 171508 HIALEAH, FL 33017-8508 6221 NORTHWEST 179 TER, MIAMI, FL 33015 POST OFFICE BOX 171508 HIALEAH, FL 33017-1508 US

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2349102

Applied For Not Applicable

- 0 // / 0 - 5

\$8.75 Additional

5. Certificate of Status Desired

Fee Required

GARCIA, ENRIQUE 17403 N.W. 61ST COURT SOUTH HIALEAH, FL 33015

## DO NOT WRITE IN THIS SPACE

Date

Daytime Phone #

8. The above the obliga	a named entity submits this statement for the p tions of registered agent.	urpose of changing its registere	ed office or	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	applicable (NOTE Registered	i Agent signaturi	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000676868
10. THE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PTD NINA M, FRANCISCO A. 6221 NW 179 TERR MIAMI, FL	TORS	<del> </del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NUNEZ F., ROSA A. 6221 NW 179 TERR MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FERNANDEZ, MILAGROS 4524 BROWN ST., APT. 1 UNION CITY, NJ 07087		DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-SI-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 further certify that the information indicated on this report or supplemental report is true and tacturally 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 furtherse empowered to execute this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with ph address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR