

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 AM
Secretary of State

DOCUMENT # H52522

1. Entity Name
BENZ FINANCIAL SERVICES, INC.



Principal Place of Business
**125 NORTHEAST 168 STREET
MIAMI, FL 33162 US**

Mailing Address
**125 NORTHEAST 168 STREET
MIAMI, FL 33162 US**



03112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2553909

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FLORES, JUAN E
125 NORTHEAST 168 STREET
MIAMI, FL 33162**

**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

JUAN E. FLORES, PRES.

3/12/08

(If the Registered Agent is a corporation, the signature must be of an authorized officer.)

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
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VP
EVANS, JAMES D SR
125 NE 168TH ST
MIAMI, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VP
SIMON, SHARON
125 NE 168TH ST
MIAMI, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**ST
HYATT, DON
125 NE 168TH ST
MIAMI, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**P
FLORES, JUAN E
125 NE 168TH ST
MIAMI, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

U000000859174
04/02/08-80011-018 150.00

**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:

JUAN E. FLORES, PRES.

3/12/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Look

Days to Process