

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90203 027 ***150.00

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1. Entity Name
TUFTS GARFIELD CORPORATION



Principal Place of Business

2100 SALZEDO ST
#300
CORAL GABLES, FL 33134

Mailing Address

2100 SALZEDO ST
#300
CORAL GABLES, FL 33134

40083198



04032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2495846

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARAZOZA \$FERNANDEZ-FRAGA, P.A
2100 SALZEDO STREET
SUITE 300
CORAL GABLES, FL 33134

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SANCHEZ, FEDERICO F.
STREET ADDRESS	2100 SALZEDO ST
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	D
NAME	SANCHEZ, ELISA O.
STREET ADDRESS	2100 SALZEDO ST
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	Sanchez, Federico J. D
NAME	
STREET ADDRESS	2100 Salzedo St.
CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	D
NAME	Sanchez Ricardo
STREET ADDRESS	2100 Salzedo St.
CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	D
NAME	Sanchez, Elimari
STREET ADDRESS	2100 Salzedo St.
CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

Federico F. Sanchez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/07

Date

Daytime Phone #