

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # K80601
 1. Entry Name
HIALEAH EXTRUDERS & FINISHERS, INC.



Principal Place of Business Mailing Address
2310 WEST 76TH STREET **2260 W 76 ST**
HIALEAH FL 33016 **HIALEAH FL 33016**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country



1st MOORE CR2E034 (10/04)

4. FEI Number **65-0111367** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
FIGUERAS, DANIEL
2310 W. 76TH ST.
HIALEAH FL 33016

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	FIGUERAS, DANIEL
STREET ADDRESS	2310 W. 76TH ST.
CITY - ST - ZIP	HIALEAH FL
TITLE	VST <input type="checkbox"/> Delete
NAME	FIGUERAS, DAGMARA
STREET ADDRESS	2310 W. 76TH ST.
CITY - ST - ZIP	HIALEAH FL
TITLE	D <input type="checkbox"/> Delete
NAME	FIGUERAS, CARLOS A
STREET ADDRESS	2200 W 76 ST
CITY - ST - ZIP	HIALEAH FL 33016
TITLE	D <input type="checkbox"/> Delete
NAME	FIGUERAS, DANNY
STREET ADDRESS	2260 W 76 ST
CITY - ST - ZIP	HIALEAH FL 33016
TITLE	D <input type="checkbox"/> Delete
NAME	FIGUERAS, JAVIER
STREET ADDRESS	2260 W 76 ST
CITY - ST - ZIP	HIALEAH FL 33016
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	UN0000243136
CITY - ST - ZIP	02/25/05-80023-025 150.00
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 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: *Dagmara Figueroa* (DAGMARA FIGUERAS) 2/22/05 305-821-0103
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #