

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # K80601**

1. Entity Name

HIALEAH EXTRUDERS & FINISHERS, INC.



Principal Place of Business

2310 WEST 76TH STREET  
HIALEAH FL 33016

Mailing Address

2260 W 76 ST  
HIALEAH FL 33016



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

3. Mailing Address: No P.O. Box #

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

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

*Dagmar Figueras* VP

(NOTE: Registered Agent signature required when reinstating)

2/1/07

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  
NAME: FIGUERAS, DANIEL  
STREET ADDRESS: 2310 W. 76TH ST.  
CITY-STATE-ZIP: HIALEAH FL ☐ Delete

TITLE: VST  
NAME: FIGUERAS, DAGMARA  
STREET ADDRESS: 2310 W. 76TH ST.  
CITY-STATE-ZIP: HIALEAH FL ☐ Delete

TITLE: D  
NAME: FIGUERAS, CARLOS A  
STREET ADDRESS: 2200 W 76 ST  
CITY-STATE-ZIP: HIALEAH FL 33016 ☐ Delete

TITLE: D  
NAME: FIGUERAS, DANNY  
STREET ADDRESS: 2260 W-76 ST  
CITY-STATE-ZIP: HIALEAH FL 33016 ☐ Delete

TITLE: D  
NAME: FIGUERAS, JAVIER  
STREET ADDRESS: 2260 W 76 ST  
CITY-STATE-ZIP: HIALEAH FL 33016 ☐ Delete

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
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STREET ADDRESS:  
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CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP: ☐ Change ☐ Addition

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:

*DAGMARA FIGUERAS* VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Dagmar Figueras*

2/1/07

Daytime Phone #