

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

2004 MAY 25 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT# K99252

1. EntityName
DUKANE PRIMERO INC.



PrincipalPlaceofBusiness
1525 SW 8TH ST
MIAMI, FL 33135-5218

MailingAddress
1525 SW 8TH ST
MIAMI, FL 33135-5218



03012004 NoChg-P CR2E034(10/03)

DO NOT WRITE IN THIS SPACE

4. FEINumber
65-0130631

AppliedFor
NotApplicable

5. CertificateofStatusDesired ☐ \$8.75 Additional
FeeRequired

6. NameandAddressofCurrentRegisteredAgent

FRANCISCO, LUIS
1525 SW 8TH STREET
MIAMI, FL 33135

**DO NOT WRITE
IN THIS SPACE**

8. Theabovenamedentitysubmits thisstatementfor thepurposeof changingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept
theobligationsofregisteredagent.

SIGNATURE

LUIS FRANCISCO VP

3-10-04

Signature,typedorprintednameofregisteredagentandtitleifapplicable.

(NOTE:RegisteredAgent'ssignatureisrequiredwhenre-

instating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. ElectionCampaignFinancing
TrustFundContribution.

\$5.00 MayBe
AddedtoFees ☐

800037338988

05/26/04--01047--027 **550.00

10. OFFICERSANDDIRECTORS

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP
VD
FRANCISCO, LUIS
1525 SW 8TH STREET
MIAMI, FL 33135

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP
PD
FRANCISCO, IVETTE
1525 SW 8TH ST.
MIAMI, FL 33135

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP

TITLE
NAME
STREETADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

VZM

12. IherbycertifythattheinformationssuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedinSection119.07(3)(i),FloridaStatutes.Ifurthercertifythattheinformation
indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath,thatIamanofficerordirector
ofthecorporationorthereceiverortrusteeempoweredtoexecutethisreportasrequiredbyChapter607,FloridaStatutes;an
changed,oronanattachmentwithanaddress,withallotherlikeempowered. dthatmynameappearsinBlock 10orBlock 11if

SIGNATURE:

3-10-04

SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR

Date

DaytimePhone#