

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90004 041 ***158.75

DOCUMENT # L11562

1. Corporation Name

CALCO INTERNATIONAL INC.



Principal Place of Business

1235 NW 93RD CT
MIAMI FL 33172
US

Mailing Address

1235 NW 93RD CT
MIAMI FL 33172
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1989

4. FEI Number

65-0141348

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



Yes



No

2. Principal Place of Business

21 1235 N.W. 93rd Court

2a. Mailing Address

26 281 N.W. 122 Av

Suite, Apt. #, etc.

22 Miami, Florida

Suite, Apt. #, etc.

27 Miami

City & State

23 Florida

City & State

28 Florida

Zip

24 33172

Country

25 Dade

Zip

29 33182

Country

30 Dade

9. Name and Address of Current Registered Agent

IGLESIAS, LUCIA
2055 NW 79 AVE
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name

Lucia Iglesias

82 Street Address (P.O. Box Number is Not Acceptable)

281 N.W. 122 Ave

83

Miami, Florida 33172

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Lucia Iglesias

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

IGLESIAS, LUCIA

STREET ADDRESS

12470 SW 9TH STREET

CITY-ST-ZIP

MIAMI FL

TITLE

D

☐ DELETE

NAME

IGLESIAS, CESAR E.

STREET ADDRESS

12470 SW 9TH STREET

CITY-ST-ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

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CITY-ST-ZIP

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NAME

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STREET ADDRESS

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CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lucia Iglesias
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/99

Date

594-0723

Daytime Phone #

CR2E034 (1/98)