## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

## DOCUMENT # M15793



## FILED Apr 18, 2007 8:00 am Secretary of State

1. Entity Name HIALEAH PLATING SHOP INC.				04-18-2007 90155 030 ***150.00				
Principal Place of Business 1640 WEST 33 PLACE HIALEAH, FL 33012		Mailing Address 1640 WEST 33 PLACE HIALEAH, FL 33012			40066495			
Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03212007	Chg-P	CR2E034 (12/06)	ı
City & State		City & State			4. FEI Numb 59-253		<del> </del>	pplied For ot Applicabl
Zip	Country	Zip	Zip Coun		5. Certificate	of Status Desired	\$8.75 Ac	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent				
HERNANDEZ, JOSE A JR. 1640 WEST 33 PLACE HIALEAH, FL 33012				Name Street Address (P.O. Box Number is Not Acceptable)				
	<i>.</i> .		City				FL Zip Coo	de
8. The above the obligat	named entity submits this statement fi ions of registered agent.	or the purpose of changing its	register	L ed office or regis	tered agent, or bo	th, in the State of Fi	orida. I am familiar with	, and accep
SIGNATURE	Signature, typed or printed name of registered ager	t and title d applicable. (NOT	E: Registere	d Agent signature requ	ired when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Trust Fund Contribu					5.00 May Be dded to Fees			
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS	CHANGES TO OFF	FICERS AND DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS	PT Oelete HERNANDEZ, JOSE A JR. 1640 WEST 33 PLACE			ET ADDRESS			☐ Change	☐ Additio
CITY-ST-ZIP	HIALEAH, FL 33012		CITY	-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP	VS HERNANDEZ, JOSE SR. 1640 WEST 33 PLACE HIALEAH, FL 33012	☐ Delete		l.			☐ Change	☐ Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Detete					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		i			☐ Change	☐ Addition

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: