2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State
04-21-2004 90047 016 ***150.00

DOCUMENT # M33102

1. Entity Name
O. BATISTA CORP.

Principal Place of Business	Mailing Address
C/O OSVALDO T. BATISTA 7313 NW 8 STREET, #D MIAMI, FL 33126 US	C/O OSVALDO T. BATISTA 7313 NW 8 STREET, #D MIAMI, FL 33126 US

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04162004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2682615

Applied For ☐
Not Applicable ☐

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

6. Name and Address of Current Registered Agent

BATISTA, OSVALDO T.
7313 NW 8TH STREET
#D
MIAMI, FL 33126

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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 _____
Signature, typed or printed name of registered agent and title if applicable. Required when registered agent is signing. Date

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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BATISTA, OSVALDO T.
STREET ADDRESS	7313 NW 8 STREET, #D
CITY ST ZIP	MIAMI, FL 33126
TITLE	VSD
NAME	BATISTA, ESTELA
STREET ADDRESS	7313 NW 8 STREET, #D
CITY ST ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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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: X Osvaldo T. Batista - Pres. 4/15/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date