2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2005 08:00 AM Secretary of State

ANIOAL REPORT				Secretary of State
1. Entity Nam	MENT # M60937 Å., INC.	44		
Principal Plac	e of Business	Mailing Address	•	
C/O HENRY T	TORRES	C/O HENRY TORRES		
7440 NW 8T		7440 NW 8TH ST.		
MIAMI, FL 3		MIAMI, FL 33126 US	İ	
	- 1 - 1			{
			***********	01122005 No Chg-P CR2E034 (10/03)
Г	O NOT WRITE	IN THIS SPA	CF	
-				4. FEI Number Applied For 65-0009868 Not Applicable
		들이 많아 걸린 걸음		69.7E
				5. Certificate of Status Desired Fee Required
6. Name and Address of Current Registered Agent				
TORRES, HENRY				
TORRES, HENRY 7440 NW 8TH STREET DO NOT WRITE				
IN THIS SPACE				
			}	11 11 10 01 110 <u>2</u>
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 Sonature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) (NOTE Registered Agent signature required when reinstating)				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				00 May Be ed to Fees
10.	OFFICERS AND D	RECTORS		
7/74.8) p			
NAME	TORRES, HENRY		1	
STPEET ADDRESS	7440 NW BTH STREET		1.7	U00000215006
CITY-ST-ZIP	MIAMI, FL 33126			02/04/05-80035-004 (50.00
માદદ	{ v			continues control of the control of
NAME	TORRES, TERESITA R		ł	
STREE" ADDRESS	7440 NW 8TH STREET		{	
CITY-ST-ZIP	MIAMI, FL 33126	_		and the second s
TITLE			1 "	· · · · · · · · · · · · · · · · · · ·
MAME	}		j	į
STREET ADDRESS			}	DO NOT MOITE
CITY-ST-ZIP			1 .	DO NOT WRITE
hite			1	IN THIS SPACE
NAME			ł	IN THIS SPACE
STREET ADDRESS			•	
ontr-st-de				and the same of th
TITLE			1	
NAME	{		1	,
STREET ADDRESS			ł	· ·
City-51-21P		,- 	an also de deserv	grand for the property and the second se
TITLE				•
MAM5	{		1	
STREET ADDRESS			1	
cuty-st-zip			I de la constitución de la const	
12. Thereby	certify that the information supplied with d	is filing does not qualify for the exe	mption stated in Se	ction 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 it made under oath; that I am an officer or director of the community of the community of the project or this I am an officer or director. I not office the community of the community of the project or this I am an officer or director.				
12. Thereby certify that the information supplied with this filling 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 olficer or director of the corporation or the receiver of 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 piled like empowered.				
11/2017				