

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # M94416	
1. Entity Name THE AGAPAY COMPANY	

Principal Place of Business 135 TAMPICO LN KISSIMMEE FL 34743 US	Mailing Address 135 TAMPICO LN KISSIMMEE FL 34743 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0065512		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent AGAPAY, RICHARD 135 TAMPICO LN KISSIMMEE FL 34743	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

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	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
SD AGAPAY, VICTORIA 135 TAMPICO LN KISSIMMEE FL 34743	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
PD AGAPAY, RICHARD 135 TAMPICO LN KISSIMMEE FL 34743	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
VP AGAPAY, JILMA L 17740 NW 77TH CT HIALEAH FL 33015	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
T AGAPAY, VICTOR 17740 NW 77 COURT HIALEAH FL 33015	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 listed officers and directors.	
SIGNATURE: RICHARD AGAPAY, PRESIDENT	1-23-2008 407-962-9039