

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 FEB 11 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # M96233

1. Entity Name  
AAA VIDAL CORPORATION



Principal Place of Business  
1821 SW 75TH AVE RD  
MIAMI, FL 33155

Mailing Address  
1821 SW 75TH AVE RD  
MIAMI, FL 33155



01062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0071860

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

VIDAL, ALFREDO  
1821 SW 75 AVENUE ROAD  
MIAMI, FL 33155

**DO NOT WRITE  
IN THIS SPACE**

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 *Alfredo Vidal* A.V.

1/22/04 A.V.  
DATE

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

(NOTE: Registered Agent signature required when reinstating)

**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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPT  
VIDAL, ALFREDO  
1821 S.W. 75 AVE ROAD  
MIAMI, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DVS  
VIDAL, ANA MARIA  
1821 SW 75 AVE ROAD  
MIAMI, FL

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

400028658444  
02/12/04--01035--006 \*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Alfredo Vidal*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/04  
Date

Daytime Phone #