

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # M99672

1. Entity Name
HARRINGTON INVESTMENTS, LTD., COMPANY



Principal Place of Business

**% JORGE S. FIGUEREDO
3918 DORAL DRIVE
TAMPA, FL 33634**

Mailing Address

**% JORGE S. FIGUEREDO
3918 DORAL DRIVE
TAMPA, FL 33634**



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2917676

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**FIGUEREDO, JORGE S.
3918 DORAL DRIVE
TAMPA, FL 33634**

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **FIGUEREDO, JORGE S.**
STREET ADDRESS **3918 DORAL DRIVE**
CITY-ST-ZIP **TAMPA, FL**

TITLE **D**
NAME **FIGUEREDO, LYDA**
STREET ADDRESS **3918 DORAL DRIVE**
CITY-ST-ZIP **TAMPA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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05/16/07-80010-002 150.00

**DO NOT WRITE
IN THIS SPACE**

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, or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE S. FIGUEREDO

4/25/07

Date

813-885-9814

Daytime Phone #