

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000005917

1. Entity Name
**COLEGIO ACADEMIA REMINGTON ALUMNI
ASSOCIATION, INC.**

Principal Place of Business
**4501 PALM AVE #104
HIALEAH, FL 33012**

Mailing Address
**4501 PALM AVE #104
HIALEAH, FL 33012**



01052005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2102317	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RODRIGUEZ, MARIO D
4501 PALM AVE #104
HIALEAH, FL 33012**

**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 _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GARCIA-TOLEDO, LUISA MARIA
STREET ADDRESS	9130 SW 134TH PLACE
CITY-ST-ZIP	MIAMI, FL 33186

TITLE	D
NAME	GUERRA, JOSE
STREET ADDRESS	14702 SW 176TH TERRACE
CITY-ST-ZIP	MIAMI, FL 33187

TITLE	D
NAME	RUHI, JOAQUIN R
STREET ADDRESS	7475 NW 7TH STREET
CITY-ST-ZIP	MIAMI, FL 33126

TITLE	D
NAME	RODRIGUEZ, MARIO D
STREET ADDRESS	2825 INDIAN CREEK DR., #905
CITY-ST-ZIP	MIAMI BEACH, FL 33140

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000178895
01/12/05-80047-005 70.00

**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 617, 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: _____

MARIO D. RODRIGUEZ
DIRECTOR

Date

Daytime Phone #