


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2005 8:00 am
Secretary of State

03-01-2005 90068 029 ***150.00

DOCUMENT # P00000002463	
1. Entity Name RANCHO LA ROSA, INC.	

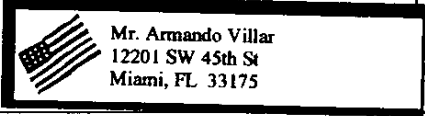
Principal Place of Business 12325 SW 51 STREET MIAMI FL 33175	Mailing Address 12325 SW 51 STREET MIAMI FL 33175
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2. Principal Place of Business 12201 SW 45 St Suite, Apt. #, etc. Miami, Fla 33175 City & State	3. Mailing Address 12201 SW 45 St Suite, Apt. #, etc. Miami, Fla 33175 City & State
Zip Country US	Zip Country US



1st MOORE CR2E034 (10/04)

4. FEI Number 65-0981637	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VILLAR, ARMANDO 12325 SW 51 STREET MIAMI FL 33175	
7. Name and Address of New Registered Agent Name VILLAR, ARMANDO Street Address (P.O. Box Number is Not Acceptable) 12201 SW 45 St City Miami, Fla FL Zip Code 33175	



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 Armando Villar (NOTE: Registered Agent signature required when reinstating) **DATE**

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME VILLAR, LUIS RICARDO STREET ADDRESS 12325 SW 51 STREET CITY-ST-ZIP MIAMI FL 33175 <input type="checkbox"/> Delete	TITLE PD NAME Villar, Armando STREET ADDRESS 12201 SW 45 St CITY-ST-ZIP Miami Fla 33175 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VD NAME VILLAR, VILMA DE STREET ADDRESS 12325 SW 51 STREET CITY-ST-ZIP MIAMI FL 33175 <input type="checkbox"/> Delete	TITLE VD NAME VILLAR, VILMA STREET ADDRESS 12201 SW 45 St CITY-ST-ZIP Miami, Fla 33175 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VD NAME VILLAR, JOSE ARMANDO STREET ADDRESS 12325 SW 51 STREET CITY-ST-ZIP MIAMI FL 33175 <input type="checkbox"/> Delete	TITLE VD NAME VILLAR, JOSE ARMANDO STREET ADDRESS 12201 SW 45 St CITY-ST-ZIP Miami, Fla 33175 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VSD NAME VILLAR, ARMANDO STREET ADDRESS 12325 SW 51 STREET CITY-ST-ZIP MIAMI FL 33175 <input type="checkbox"/> Delete	TITLE VSD NAME VILLAR, LUIS RICARDO STREET ADDRESS 12201 SW 45 St CITY-ST-ZIP Miami, Fla 33175 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		

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: Armando Villar **2-2205 (305) 229-2735**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #