

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jul 12, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # P00000010253**

1. Entity Name  
**SENZA TEMPO OF FLORIDA, INC.**



Principal Place of Business  
**6039 COLLINS AVENUE UNIT 1537  
MIAMI BEACH, FL 33140-2255**

Mailing Address  
**6039 COLLINS AVENUE UNIT 1537  
MIAMI BEACH, FL 33140-2255**



**DO NOT WRITE IN THIS SPACE**

07012005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-3650763**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MORGAN, RICHARD A  
2699 SOUTH BAYSHORE DRIVE 7TH FLOOR  
MIAMI, FL 33133**

**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 reinstalling)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

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	PD CARRODEGUAS, VICENTE 6039 COLLINS AVE. #1537 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARRODEGUAS, MARTA 6039 COLLINS AVE. #1537 MIAMI BEACH, FL 33140
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07/12/05-80006-005 558.75

**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:**

*Vicenta Carrodeguas*  
**Vicenta Carrodeguas**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/5/05 (305) 323-2342**  
Date Daytime Phone #