

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000057197

1. Entity Name
AQUARELA DO BRASIL, INC.



FILED

04 NOV -1 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
947 JADE COURT
WESTON, FL 33326

Mailing Address
947 JADE COURT
WESTON, FL 33326

2. Principal Place of Business

20871 Johnson St
Suite, Apt. #, etc. 104

3. Mailing Address

20871 Johnson St
Suite 104

City & State

Pembroke Pines FL
Zip 33029 Country USA

City & State

Pembroke Pines FL
Zip 33029 Country USA

10012004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-1016373

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PINI ROSALEM, DEBORAH
947 JADE COURT
WESTON, FL 33326

Name

Street

City

Pembroke Pines

FL

Zip Code

33029

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

Deborah S. Pinini

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

(NOTE: Registered Agent signature required when reinstating)

DATE

10/09/04

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PINI ROSALEM, DEBORAH
STREET ADDRESS 947 JADE COURT
CITY-ST-ZIP WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME PINI ROSALEM, DEBORAH
STREET ADDRESS 20871 JOHNSON ST - SUITE 104
CITY-ST-ZIP Pembroke Pines - FL - 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

Deborah S. Pinini

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/09/04 (954) 499-7171



9/27/2004

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Aquarela Do Brasil, Inc..
Doc #P00000057197
FEI # 65-1016373

Dear Sir/Madam:

This is to inform you that we had not received the annual report form year 2004 due to the fact that you have the wrong address in your records, please waive the fees since I assumed my report was filed on time.

These instructions were given to me by phone today by: Mr. Michelle Milligan please find enclosed the report and check for the year 2004 for the amount of \$150.00

Sincerely,

A handwritten signature in cursive script, appearing to read 'Deborah Rosalem'.

Deborah Rosalem.
President