

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P00000060859

1. Entity Name  
VENE-TAO CORPORATION



Principal Place of Business  
2555 COLLINS AVENUE APT #1408  
MIAMI BEACH, FL 33140

Mailing Address  
C/O BSS&S  
9655 S. DIXIE HWY., 3RD FLOOR  
MIAMI, FL 33156

**FILED**  
**Aug 22, 2005 08:00 AM**  
**Secretary of State**



07062005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1055291	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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

MARI, MANUEL J  
250 BIRD ROAD #200  
CORAL GABLES, FL 33146

**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 \$550.00  
Due by September 7, 2005**

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

U00000376862  
08/22/05-80005-020 550.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	TEJERA, EDUARDO M
STREET ADDRESS	2555 COLLINS AVENUE APT #1408
CITY-ST-ZIP	MIAMI BEACH, FL 33140

TITLE	D
NAME	MORAN DE TEJERA, JULIETA C
STREET ADDRESS	2555 COLLINS AVENUE APT #1408
CITY-ST-ZIP	MIAMI BEACH, FL 33140

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Eduardo Tejera*

*08/22/05*

Date

Daytime Phone #