

2004 FOR PROFIT CORPORATION ANNUAL REPORT

1072

DOCUMENT # P00000067036

1. Entity Name
F. LLERENA CHASSIS CORP.



Principal Place of Business
3000 NW 24TH ST
MIAMI, FL 33142

Mailing Address
3000 NW 24TH ST
MIAMI, FL 33142

FILED

04 OCT -7 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1039461

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICARDO, RAUL
1840 W 49TH ST SUITE 100
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

**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	D
NAME	LLERENA, FRANCISCO
STREET ADDRESS	3000 NW 24TH ST
CITY - ST - ZIP	MIAMI, FL 33142
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

400041631644
10/06/04--01012--009 **150.00

**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 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



RAUL RICARDO JR.
CERTIFIED PUBLIC ACCOUNTANT

2082

October 4, 2004

Division of Corporations
P.O. Box 6198
Tallahassee, Florida 32314

Re: F. Llerena Chassis Corp.
Document # P00000067036

To Whom It May Concern:

Please be advised that the above-mentioned Corporation did not receive their UBR form. The form was downloaded on Friday from my office, but the form indicated that the due date for those who did not receive their UBR form was September 8th. I request that you accept the enclosed check in the amount of \$150 and waive the late fees.

If you have any questions, please feel free to contact my office.

Thank you,

Marlene Ricardo
Office Manager