

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90005 033 ***150.00

DOCUMENT # P00000084078

1. Entity Name

IMPACT & GONZALEZ PRINTING, CORP.



Principal Place of Business

**201 22 AVE STE #7
MIAMI, FL 33135**

Mailing Address

**201 22 AVE STE #7
MIAMI, FL 33135**

34004000



DO NOT WRITE IN THIS SPACE

07122004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1037460

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BURKE, GLORIA
10500 SW 108TH AVE, APT B-314
MIAMI, FL 33176**

**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 PD
NAME BURKE, GLORIA
STREET ADDRESS 10500 SW 108TH AVE, APT B-314
CITY-ST-ZIP MIAMI, FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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

Date

Daytime Phone #

ATTACHMENT

54064868

July 12, 2004

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O BOX 1500
TALLAHASSEE, FL 32302-1500

RE: UNIFORM BUSINESS REPORT
IMPACT & GONZALEZ PRINTING, CORP.
DOC. NO.: P00000084078

To whom it may concern,

The reason of this letter is to notify you that we did not receive the prior notice of the Uniform Business Report 2004 For Profit Corporation.

Enclosed you can find the form with the corresponding changes and payment of \$150.00 dollars.

Sincerely,



Gloria Burke
President
IMPACT GONZALEZ PRINTING, CORP.