

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2006 8:00 am
Secretary of State

07-07-2006 90002 048 ***158.75

DOCUMENT # P01000015341

1. Entity Name
HORIZON FINANCIAL CORP.



Principal Place of Business
**2972 S.W. 7TH ST.
MIAMI, FL 33135**

Mailing Address
**PO BOX 52-1383
MIAMI, FL 33152-1383**

2. Principal Place of Business
1000 Ponce de Leon Blvd

3. Mailing Address

Suite, Apt. #, etc.
Suite 210

Suite, Apt. #, etc.

City & State
Coral Gables, FL

City & State

Zip
33134

Country

Zip

Country

06022006 Chg-P CR2E034 (11/05)

4. FEI Number
65-1084933

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RUIZ, JORGE JR.
2972 S.W. 7TH ST.
MIAMI, FL 33135**

7. Name and Address of New Registered Agent

Name **Jorge Ruiz Jr**
Street Address (P.O. Box Number is Not Acceptable)
1000 Ponce de Leon Blvd.
Suite 210
City **Coral Gables** **FL** Zip Code **33134**

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)

6/2/06
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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
NAME **D**
STREET ADDRESS **RUIZ, JORGE JR.**
CITY-ST-ZIP **2972 S.W. 7TH ST.
MIAMI, FL 33135** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **President** ☒ Change ☐ Addition
STREET ADDRESS **Ruiz, Jorge Jr.**
CITY-ST-ZIP **1000 Ponce de Leon Blvd. Suite 210
Coral Gables, FL 33134**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

6/2/06
Date

305-446-0190
Daytime Phone #