

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

02-10-2004 90002 023 \*\*\*150.00  
FILED 0000015846

04 FEB 20 PM 2:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000015846

1. Entity Name

MUNAO & HESS, INC.



Principal Place of Business

1105 SW MARTIN DOWNS BLVD  
PALM CITY FL 34990

Mailing Address

POST OFFICE BOX 2170  
PALM CITY FL 34994

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1105 SW Martin Downs Blvd

MOORE

CR2E034 (11/03)

**REINSTATEMENT** 03-04

City & State

Zip

Country

City & State

Zip

Country

Palm City FL  
34990 Martin

4. FEI Number

65-1078567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MUNAO, NATE III  
1105 SW MARTIN DOWNS BLVD  
PALM CITY FL 34990

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Nate Munao III

Nate Munao III

2-1-04

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

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MUNAO, NATE III	
STREET ADDRESS	2400 LAKERIDGE DR	
CITY-ST-ZIP	PALM CITY FL 34990	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	3/27/03 90079 007 \$150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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: Nate Munao III Nate Munao III 2-1-04 772 286-2412  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTENTION: MICHELLE MILLIGAN

2-20-04

*zaltz*

MUNAO AND HESS INC.  
1105 SW MARTIN DOWNS BLVD.  
PALM CITY, FL 34980

FLORIDA DEPT OF STATE  
FAX 850 245 6897

DEAR MICHELLE

MUNAO AND HESS PREVIOUSLY KNOW AS BROWNING AND MUNAO  
DID NOT RECEIVE A LETTER OF CORPORATE REJECTION AS OF MARCH 2003  
OR ANY OTHER CORESPONDENCE REGARDING A REJECTION OF CORPORATE  
FILING.

PLEASE WAIVE THE PENALTY FEE AND REINSTATE THE ABOVE STATED  
CORPORATION.

THANK YOU

*Nate Munao III*  
NATE MUNAO III