

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 01, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000032251

1. Entity Name
ARDECO INVESTMENTS, INC.



Principal Place of Business
9940 N.W. 19TH ST.
PEMBROKE PINES, FL 33024

Mailing Address
9940 N.W. 19TH ST.
PEMBROKE PINES, FL 33024



03222003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1089231

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

QUINTERO, MARTHA L
9940 N.W. 19TH ST.
PEMBROKE PINES, FL 33024

**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 QUINTERO, MARTHA L
STREET ADDRESS 9940 N.W. 19TH ST.
CITY - ST - ZIP PEMBROKE PINES, FL 33024

TITLE P
NAME QUINTERO, JORGE
STREET ADDRESS 9940 NW 19 ST
CITY - ST - ZIP PEMROKE PINES, FL 33024

TITLE V
NAME QUINTERO, DORIAN E
STREET ADDRESS 9940 NW 19 ST
CITY - ST - ZIP PEMBROKE PINES, FL 33024

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

11000000161815
06/01/04-80002-007 150.00

**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: J. Quintero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/26/2004
Date

Daytime Phone #