

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-26-2004 91053 023 ***150.00

DOCUMENT # P01000111421

1. Entity Name
ALDERMAN ENTERPRISES, INC.



Principal Place of Business 4266 MAGNOLIA RIDGE DR WESTON, FL 33331 } CHANGE
Mailing Address 4266 MAGNOLIA RIDGE DR WESTON, FL 33331 } CHANGE



2. Principal Place of Business 18400 NW 2ND AVE (441)
3. Mailing Address 18400 NW 2ND AVE (441)

Suite, Apt. #, etc.
BAY 1-A

Suite, Apt. #, etc.
BAY 1-A

04222004 Chg-P CR2E034 (10/03)

City & State
MIAMI, FL

City & State
MIAMI FL

4. FEI Number
04-3595022

Applied For
Not Applicable

Zip
33169

Country
U.S.A.

Zip
33169

Country
U.S.A.

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

6. Name and Address of Current Registered Agent

PINEDA, MARIA T
4266 MAGNOLIA RIDGE DR
WESTON, FL 33331 } CHANGE

7. Name and Address of New Registered Agent

Name PINEDA, MARIA T.
Street Address (P.O. Box Number is Not Acceptable)
18400 NW 2ND AVE (441) BAY 1-A
City MIAMI FL Zip Code 33169

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 x Maria T. Pineda

4/22/04

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

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME PINEDA, MARIA T
STREET ADDRESS 4266 MAGNOLIA RIDGE DR
CITY-ST-ZIP WESTON, FL 33331 ☒ 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 P
NAME PINEDA, MARIA T.
STREET ADDRESS 4363 MAGNOLIA RIDGE DR
CITY-ST-ZIP WESTON FL 33331 ☒ Change ☐ Addition

TITLE D
NAME LAMAS, EFRAIN
STREET ADDRESS 4363 MAGNOLIA RIDGE DR.
CITY-ST-ZIP WESTON FL 33331 ☐ 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 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: x Maria T. Pineda
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/04
Date

305-653-3254
Daytime Phone #