

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90096 012 ***150.00

DOCUMENT # P02000011740

1. Entity Name
CARMEL VIEWS, INC.



Principal Place of Business
**C/O NICOLAS FERNANDEZ PA
780 NW LE JEUNE ROAD SUITE 324
MIAMI, FL 33126**

Mailing Address
**C/O NICOLAS FERNANDEZ PA
780 NW LE JEUNE ROAD SUITE 324
MIAMI, FL 33126**

40033613



2. Principal Place of Business - No P.O. Box #
10 N.W. LE JEUNE ROAD

3. Mailing Address
10 N.W. LE JEUNE ROAD

01262007 Chg-P CR2E034 (12/06)

Suite, Apt. #, etc.
SUITE 500

Suite, Apt. #, etc.
SUITE 500

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
20-0267442

Applied For
Not Applicable

Zip
33126

Country

Zip
33126

Country

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

6. Name and Address of Current Registered Agent

**ESQUIRE CORPORATE SERVICES, INC.
780 NW LE JEUNE ROAD SUITE 324
MIAMI, FL 33126**

7. Name and Address of New Registered Agent

Name
ESQUIRE CORPORATE SERVICES, INC

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

10 N.W. LE JEUNE ROAD STE 500

City
MIAMI

FL

Zip Code
33126

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

3-9-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPS
ESPEJO, EDGAR E
780 NW LE JEUNE ROAD, #324
MIAMI, FL 33126** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPS
ESPEJO, EDGAR E
10 N.W. LE JEUNE ROAD STE 500
MIAMI, FL 33126** ☒ Change ☐ Addition

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

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

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☐ Change ☐ Addition

TITLE
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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

Date

Daytime Phone #