

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000014844

1. Entity Name
SIBONEY INVESTMENT GROUP, INC.



Principal Place of Business
**10740 S.W. 24 ST.
MIAMI, FL 33165 US**

Mailing Address
**P.O. BOX 55-8365
MIAMI, FL 33255**



DO NOT WRITE IN THIS SPACE

02092005 No Chg-P CR2E034 (10/03)

4. FEI Number **01-0651190** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**EGUSQUIZA, JOHN E
9130 SOUTH DADELAND BLVD
SUITE 1209
MIAMI, FL 33156**

**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
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ALONSO, ENRIQUE
STREET ADDRESS	10740 S.W. 24 STREET
CITY - ST - ZIP	MIAMI, FL 33165
TITLE	VP
NAME	ALONSO, ENRIQUE JR
STREET ADDRESS	10740 SW 24 STREET
CITY - ST - ZIP	MIAMI, FL 33165
TITLE	S
NAME	ALONSO, ELENA
STREET ADDRESS	10740 SW 24 STREET
CITY - ST - ZIP	MIAMI, FL 33165
TITLE	T
NAME	ALONSO, GRISEL
STREET ADDRESS	10740 SW 24 STREET
CITY - ST - ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000235776
02/19/05-80020-002 150.00

**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)(f), 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:

Enrique Alonso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Enrique Alonso
Date

305-226-4010
Daytime Phone #