2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P02000030174

1. Entity Name
MOBILI RICCI THERMO FOIL DOORS, INC.

Principal Place of Business	Mailing Address
7665 W 2ND COURT HIALEAH, FL 33014	7665 W 2ND COURT HIALEAH, FL 33014

DO NOT WRITE IN THIS SPACE

03172008 No Chg-P CR2E034 (11/05)

4. FEI Number
35-2163443
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

D'AMICO, PASCUAL
7665 WEST 2ND CT
HIALEAH, FL 33014

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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 date required. If agent is a corporation, the name and title of the officer or agent signing must be provided.

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

U00000294131
04/24/08-80015-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	RICCI, DANIEL M
STREET ADDRESS	20211 N.W. 8TH ST.
CITY ST ZIP	PEMBROKE PINES, FL 33029
TITLE	PD
NAME	D'AMICO, PASCUAL
STREET ADDRESS	14308 S.W. 92ND ST.
CITY ST ZIP	MIAMI, FL 33186
TITLE	S
NAME	RICCI, MARIBEL G
STREET ADDRESS	20211 N.W. 8TH ST.
CITY ST ZIP	PEMBROKE PINES, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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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 blank unless authorized.

SIGNATURE: Maribel Ricci 4-8-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CK 3033