

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90290 002 ***150.00

DOCUMENT # P02000041702

1. Entity Name
VELBOC CORP.



Principal Place of Business
**18 N. MIAMI AVE.
MIAMI, FL 33128**

Mailing Address
**18 N. MIAMI AVE.
MIAMI, FL 33128**

DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0956377

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FARAGURE, MARCELO
18 N. MIAMI AVE.
MIAMI, FL 33128**

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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 designation of registered agent.

SIGNATURE:

Signature of person named in Section 6 (registered agent) and the fees paid.

Signature of registered agent (signature required for new designations)

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
NAME
STREET ADDRESS
CITY ST ZIP
**D
FARAGURE, MARCELO
18 NORTH MIAMI AVE.
MIAMI, FL 33128**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

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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)(c), 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 Book 10 or Book 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

MARCELO FARAGURE
Signature and Typed or Printed Name of Signing Officer or Director

Date

State of Florida