

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90369 005 ***150.00

DOCUMENT # P02000070727

1. Entity Name
THE CARTRIDGE ANGEL, INC.



Principal Place of Business
12218 SW 131 AVE
MIAMI, FL 33186

Mailing Address
8021 SW 151 CT
MIAMI, FL 33193

2. Principal Place of Business - No P.O. Box #
12256 S.W 131 AVE
Suite, Apt. #, etc.

3. Mailing Address
12256 S.W 131 AVE
Suite, Apt. #, etc.

City & State
MIAMI, FL
Zip
33186

City & State
MIAMI, FL
Zip
33186

04242008 Chg-P CR2E034 (12/06)

4. FEI Number
50-0004677

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PEREZ, YANEISY
8021 SW 151 CT
MIAMI, FL 33193

7. Name and Address of New Registered Agent

Name Yaneisy Hurtado
Street Address (P.O. Box Number is Not Acceptable)
12256 S.W 131 AVE
City MIAMI FL Zip Code 33186

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]

[Signature] Yaneisy Hurtado

[Signature] 4/24/08

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, 2008 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	☐ Delete
NAME	HURTADO, VICTOR	
STREET ADDRESS	8021 SW 151 CT	
CITY-ST-ZIP	MIAMI, FL 33193	
TITLE	ST	☐ Delete
NAME	PEREZ, YANEISY	
STREET ADDRESS	8021 S.W. 151 CT	
CITY-ST-ZIP	MIAMI, FL 33193	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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]

Victor Hurtado

4/25/08

305-969-2181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #