

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P02000098518

1. Entity Name
CELCO DEVELOPMENT, INC.



FILED
Mar 10, 2004 08:00 AM
Secretary of State

Principal Place of Business
118 S.W. SOUTH RIVER DRIVE
MIAMI FL 33130

Mailing Address
118 S.W. SOUTH RIVER DRIVE
MIAMI FL 33130

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. # etc.

City & State

Zip

Country



MOORE CR2E034 (11/03)

4. FEI Number
54-2072759

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RICH, LUCILLE
118 S.W. SOUTH RIVER DRIVE
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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
RICH, LUCILLE
118 S.W. SOUTH RIVER DRIVE
MIAMI FL 33130

☐ Delete

TITLE
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CITY - ST - ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Lucille Rich Lucille Rich

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 5, 2004

Date

Daytime Phone #