

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90144 030 ***150.00

DOCUMENT # P02000130247

1. Entity Name
CARDOZO & GONZALEZ INVESTMENTS, INC.



Principal Place of Business
**926 N. MAIN STREET
KISSIMMEE, FL 34744**

Mailing Address
**200 E ROBINSON ST, STE 500
ORLANDO, FL 32801**

14021521



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

Applied For

16-1647075

Not Applicable

Zip

Country

Zip

Country

32801

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDRY STONER DELANCETT & BROWN P.A.
20 N. ORANGE AVENUE
ORLANDO, FL 32801**

Name

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

Suite 407

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

M Steven Brown **4/28/04**

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**PSD
GONZALEZ, WILMER S
14007 ENTRADA DR
ORLANDO, FL 32837** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**926 N. main Street
Kissimmee, FL 34744** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**V
CARDOZO, WASHINGTON G
14007 ENTRADA DDR.
ORLANDO, FL 32837** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**926 N. main Street
Kissimmee, FL 34744** ☒ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: ☒

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/04