

2004 FOR PROFIT CORPORATION ANNUAL REPORT

192

FILED

04 MAY 17 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03072003 Chg-P CR2E034 (10/03)

MRS

4. FEI Number **57-1144061** Applied For ☐ Not Applicable ☐

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

DOCUMENT # P03000002721			
1. Entity Name CHERTO CORP.			
Principal Place of Business 1171 N.E. 169 TERR. NORTH MIAMI BEACH, FL 33162		Mailing Address 1171 N.E. 169 TERR. NORTH MIAMI BEACH, FL 33162	
2. Principal Place of Business 800 NE 175 TH STREET		3. Mailing Address 800 NE 175 TH STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State NORTH MIAMI BEACH - FL		City & State N. MIAMI BEACH - FL	
Zip 33162	Country USA	Zip 33162	Country USA

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
AQUINO, JACQUELINE 1171 N.E. 169 TERR. NORTH MIAMI BEACH, FL 33162		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 DATE **05-14-04**

Signature, typed or printed name of registered agent and title, applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AQUINO, JACQUELINE 1171 N.E. 169 TERR. NORTH MIAMI BEACH, FL 33162 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 800 NE 175 TH STREET NORTH MIAMI BEACH - FL - 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DOMINGUEZ, JULIO 1171 N.E. 169 TERR. NORTH MIAMI BEACH, FL 33162 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 800 NE 175 TH STREET NORTH MIAMI BEACH - FL - 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200037341242 05/26/04--01049--015 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: DATE **05/14/04** DAYTIME PHONE # **305-300-5069**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**CHERTO CORPORATION
800 NE 175 TH STREET
NORTH MIAMI BEACH-FLORIDA-33162
DOCUMENT # P-03000002721
E.I.N : 57-1144061**

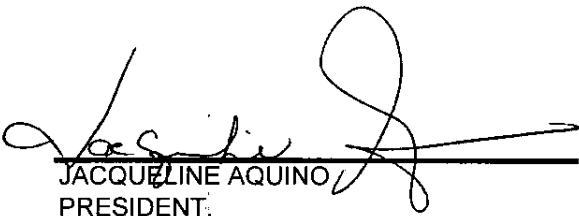
**SECRETARY OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT SECTION
409 EAST GAINES STREET
TALLAHASSEE, FL-32314**

TO WHOM IT MAY CONCERN.

**I JACQUELINE AQUINO SUBMITTING THIS LETTER TO INFORM YOU THAT THE REASON FOR
ME NOT HAVING SENT THE ANNUAL REPORT YOU BECAUSE, I DID NOT RECEIVED THE
FORM (2004 FOR PROFIT CORPORATION ANNUAL REPORT0)**

**ATTACHED YOU WILL FIND A CKECK IN THE AMOUNT OF US. 150.00
WHICH IS THE FEE FOR ONE YEAR, PLEASE ACCEPT THIS FEE**

SINCERELY,



JACQUELINE AQUINO
PRESIDENT.