

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2004 8:00 am
Secretary of State

05-24-2004 90007 007 ***150.00

DOCUMENT # P03000007918

1. Entity Name
SOUTH POLICE SUPPLIES, INC.



Principal Place of Business
**1582 N. GOLDEN EYE LANE
HOMESTEAD, FL 33035**

Mailing Address
**1582 N. GOLDEN EYE LANE
HOMESTEAD, FL 33035**

66429207



2. Principal Place of Business

2016 NE 8 Street

Suite, Apt. #, etc.

3. Mailing Address

2016 NE 8 Street

Suite, Apt. #, etc.

03132003 Chg-P CR2E034 (10/03)

City & State

Homestead, FL

City & State

Homestead, FL

4. FEI Number

75-3095718

Applied For

Not Applicable

Zip

33033

Country

USA

Zip

33033

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORALES, FERNANDO
1582 N. GOLDEN EYE LANE
HOMESTEAD, FL 33035**

7. Name and Address of New Registered Agent

Name **Saldana, Paul**

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

2016 NE 8 St

City **Homestead**

FL

Zip Code

33033

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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MORALES, FERNANDO
1582 N. GOLDEN EYE LANE
HOMESTEAD, FL 33035**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD Saldana, Paul
2016 NE 8 St
Homestead, FL 33033**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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CITY - ST - ZIP

☐ Change ☐ 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 fee empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/21/04

786-287-8122

(305) 245-3122

Attachment

66429207...

Homestead, Florida
May 2004

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re:

P03000007918

SOUTH POLICE SUPPLIES, INC.
1582 N. GOLDEN EYE LANE
HOMESTEAD, FL 33035

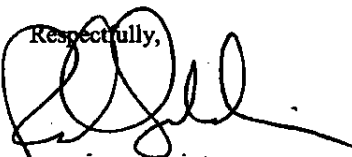
To Whom It May Concern:

Upon our conversation I am enclosing the 2003 UBR form after due date (05/01/2004) due to the fact that I never received such notice to file. Enclose is a payment of \$150.00 dollars per your request.

Please be so kind to waive any late fees that I might have and to put this corporation in its current status.

Thank you for your help and I hope that this can solve this matter and avoid further penalties.

Respectfully,



RAUL SALDANA
President