


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90518 047 ***150.00

DOCUMENT # P03000010895 1. Entity Name REPRECOL, CORP.																																
Principal Place of Business 16363 MALIBU DR WESTON, FL 33326 US			Mailing Address 16363 MALIBU DR WESTON, FL 33326 US																													
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Suite, Apt. #, etc.		Suite, Apt. #, etc.																														
City & State		City & State																														
Zip	Country	Zip	Country	4. FEI Number 20-0928636																												
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																												
6. Name and Address of Current Registered Agent MARRERO, JOSE C 1820 NORTH CORPORATE LAKES BLVD SUITE 105 WESTON, FL 33326				7. Name and Address of New Registered Agent Name Jacqueline F Rodriguez Street Address (P.O. Box Number is Not Acceptable) 1820 North Corporate Lakes Blvd Sk 108 City Weston FL Zip Code 33326																												
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 <u><i>Jacqueline Rodriguez</i></u> DATE 4-29-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																														
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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: <u><i>Jacqueline Rodriguez (for)</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 4-29-05 Daytime Phone # 305-350-0725																												

50045404



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