


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 21, 2004 8:00 am
Secretary of State

05-10-2004 90470 001 ***150.00

| | | | |
|---|--|---|--|
| DOCUMENT # P03000017906 1. Entity Name SECRET INVESTMENTS INC | |  | |
| Principal Place of Business 8323 NW 12 STREET SUITE 202 MIAMI FL 33126 | | Mailing Address 8323 NW 12 STREET SUITE 202 MIAMI FL 33126 | |
| 2. Principal Place of Business 8726 NW 26 ST Suite, Apt. #, etc. #24 | | 3. Mailing Address 8726 NW 26 ST Suite, Apt. #, etc. Suite # 24 | |
| City & State Doral - FL | | City & State Doral FL | |
| Zip 33172 | | Country DADE | |
| 4. FEI Number 45-0501691 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BLANCO, JUAN C 8323 NW 12 STREET SUITE 202 MIAMI FL 33126 | | 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 _____ DATE _____ <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, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State | | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE _____ NAME BLANCO, JUAN C <input type="checkbox"/> Delete STREET ADDRESS 8323 NW 12 STREET CITY-ST-ZIP MIAMI FL 33126 | TITLE _____ NAME BLANCO, JUAN C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS 8726 NW 26 ST #24 CITY-ST-ZIP Doral FL 33172 | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ |
| TITLE _____ NAME _____ <input type="checkbox"/> Delete STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ |
| TITLE _____ NAME _____ <input type="checkbox"/> Delete STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ | TITLE _____ NAME _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS _____ CITY-ST-ZIP _____ |
| 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | Date 4/27/2004 (305) 593-7867 <small>Date Telephone #</small> | |