

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000019509**

1. Entity Name  
PUIG & ASSOCIATES ARCHITECTS & PLANNERS, INC.



Principal Place of Business

4970 SW 72ND AVENUE  
SUITE 107  
MIAMI, FL 33155

Mailing Address

4970 SW 72ND AVENUE  
SUITE 107  
MIAMI, FL 33155



04092008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
33-1044105

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

KLEIN, DONALD M ESQ.  
2665 SOUTH BAYSHORE DRIVE  
SUITE 903  
COCONUT GROVE, FL 33133

**DO NOT WRITE  
IN THIS SPACE**

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**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	P,D
NAME	PUIG, RALPH JR.
STREET ADDRESS	4970 SW 72ND AVENUE, SUITE 107
CITY-ST-ZIP	MIAMI, FL 33155

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000948421  
06/02/08-80053-011 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 #

*Ralph Puig Jr.*

4/9/08 305-663-8900