

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000028841

1. Entity Name
FIREPLACE DEPOT, INC.



Principal Place of Business
4707 E 11 AVE
HIALEAH, FL 33013 US

Mailing Address
4707 E 11 AVE
HIALEAH, FL 33013 US

FILED
Mar 13, 2006 08:00 AM
Secretary of State



03082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1581337

{Applied For
{Not Applicat

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

6. Name and Address of Current Registered Agent

SOLER, DANIEL A
4707 E 11 AVE
HIALEAH, FL 33013

**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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

100000463257
13/21/06-80066-013 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SOLER, DANIEL A
4707 E 11 AVE
HIALEAH, FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC
VENEDICTO, NATALIE T
1025 EAST 23RD STREET
HIALEAH, FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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 changed, or on an attachment with an address, without other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/06

305-953-1393