

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

**Feb 18, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000053354

1. Entity Name

MADAJOLU INVESTMENT, INC.



Principal Place of Business

**15131 SW 49TH COURT
MIRAMAR FL 33027**

Mailing Address

**15131 SW 49TH COURT
MIRAMAR FL 33027**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/04)



4. FEI Number

56-2371182

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARCIA, MIGUEL A
17801 NW 80TH AVENUE
HIALEAH FL 33015**

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

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, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

**9. Election Campaign Financing
Trust Fund Contribution.**

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME GARCIA, DANIEL
STREET ADDRESS 15131 SW 49TH COURT
CITY - ST - ZIP MIRAMAR FL 33027

TITLE VD ☐ Delete
NAME GARCIA, JORGE L
STREET ADDRESS 931 WEST 80TH PL
CITY - ST - ZIP HIALEAH FL 33014

TITLE STD ☐ Delete
NAME GARCIA, MIGUEL A
STREET ADDRESS 17801 NW 80TH AVENUE
CITY - ST - ZIP HIALEAH FL 33015

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME U00000235127
STREET ADDRESS 02/18/05-80047-020 158.75
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
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)(f), 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

2/15/05
Date

954 4411828
Daytime Phone #