


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000065492	
1. Entity Name LALE CORPORATION	

Principal Place of Business 3703 NW 41ST STREET MIAMI, FL 33142	Mailing Address 3703 NW 41ST STREET MIAMI, FL 33142
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DO NOT WRITE IN THIS SPACE



04192005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0056313	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 ROSADO, SILVIA 1345 LINCOLD ROAD S-405 MIAMI BEACH, FL 33139
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROSADO, SILVIA 1345 LINCOLD ROAD S-405 MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ROSADO, FRANK 5020 SW 87 CT MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROSADO, FRANK 5020 SW 87 CT MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ROSADO, FRANK 5020 SW 87 CT MIAMI, FL 33165
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/22/05-80036-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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: FRANK ROSADO 4/20/2005 786-525-6177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #