## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Aug 09, 2004 8:00 am Secretary of State **DOCUMENT # P03000069284** 08-09-2004 90005 020 \*\*\*150.00 1. Entity Name SPLASH PARTY RENTAL INC. Principal Place of Business Mailing Address 54067531 2113 SW 14TH TERRACE #A 2113 SW 14TH TERRACE #A MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08042004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For \_م)5 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODRIGUEZ, AMAURY Street Address (P.O. Box Number is Not Acceptable) 2113 SW 14TH TERRACE #A MIAMI, FL 33145 City 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 aignature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the $\Box$ Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE RODRIGUEZ, AMAURY NAME NAME 2113 SW 14TH TERRACE #A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL. 33145 ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Defete Chance TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption flated 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: 4

FILED

Attachpent Dre # \$03000069284 540675-31

Splash Party Rentals, Inc 2113 SW 14 Terrace #A Miami, Fl 33145

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Fl 32314

August 4, 2004

To Whom It May Concern;

I am enclosing a copy of my annual corporation report for 2004, along with a check for \$150.00.

The first notice that I have received that this was due was when I received a notice of intent to dissolve, in July of 2004.

Thank You,

TO OPEN: FOLD AND TEAR ALONG BOTTED LINE, THEN PULL APART. 540675



FLORIDA DEPARTMENT OF STATE
Secretary of State
Glenda E. Hood
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

First-Class Mail U.S. Postage PAID. State of Florida 84321

## NOTICE OF INTENT TO DISSOLVE

## To receive the form by mail:

• Detach this postcard.

MIAMI FL 33145-1358

- Enter address to mail report to, if different from preprinted mailing address.
- Affix postage on reverse side and mail.
- Allow 10-14 business days to receive form.

Document # P03000069284 I
SPLASH PARTY RENTAL INC.
2113 SW 14TH TERRACE #A

Mail Report to:



CR2E095 4/04

TO OPEN: FOLD AND TEAR ALONG DOTTED LINE, THEN PULL APART.