

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

01-20-2004 90059 031 ***150.00

DOCUMENT # P03000081795



1. Entity Name
COLMIG ENGINEERING, INC.

Principal Place of Business
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

Mailing Address
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

66433410



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08252004

Chg-P

CR2E034 (10/03)

4. FEI Number
05-0580281

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRICENO, PEDRO
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

7. Name and Address of New Registered Agent

Name
Igor Colmenares
Street Address (P.O. Box Number is Not Acceptable)
1820 N. Corporate Lakes Blvd.
Suite 205
City
weston FL Zip Code
33326

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

8/25/2004

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
D
BRICENO, PEDRO ☒ Delete
STREET ADDRESS
1820 N. CORPORATE LAKES BLVD., SUITE 205
CITY-ST-ZIP
WESTON, FL 33326

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
President
Igor Colmenares ☐ Change ☒ Addition
STREET ADDRESS
1820 N Corporate Lakes Blvd, Ste 205
CITY-ST-ZIP
Weston, FL 33326

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

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

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

TITLE
NAME
☐ Change ☐ Addition
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

8/25/2004

9544528200

Date

Daytime Phone #

2004 FOR PROFIT CORPORATION ANNUAL REPORT

1/20/2004-90059-031-\$150.00-\$150.00

DOCUMENT # P03000081795

1. Entity Name
COLMIG ENGINEERING, INC.



Attachment

66433410

Principal Place of Business
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

Mailing Address
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082004

Chg-P

CR2E034 (10/03)

4. FEI Number

05-0580281

Applied For

Not Applicable

6. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

BRICENO, PEDRO
1820 N. CORPORATE LAKES BLVD., SUITE 205
WESTON, FL 33326

Name

Igor Colmenares

Street Address (P.O. Box Number is Not Acceptable)

1820 N. Corporate Lakes Blvd.

Suite 205

City

Weston

FL

Zip Code

33326

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 of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

1-8-04

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME BRICENO, PEDRO
STREET ADDRESS 1820 N. CORPORATE LAKES BLVD., SUITE 205
CITY-ST-ZIP WESTON, FL 33326

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President
NAME Igor Colmenares
STREET ADDRESS 1820 N. Corporate Lakes Blvd., #205
CITY-ST-ZIP Weston, FL 33326

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 my address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-04

DATE

954-452-8200

Daytime Phone

Attachment
66433410
David Doddo
C.P.A.

300 South Pine Island Road | Suite 256 | Plantation | Florida 33324
Office: (954) 452-8200 | Fax: (954) 452-8333 | www.Doddo.com

August 25, 2004

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, Florida 32314-6198

Re: Notice of Intent to Dissolve
Colmig Engineering, Inc.
Document # P03000081795


Dear Sirs:

Please accept this as a response to your notice of intent to dissolve the above-mentioned corporation. The corporation timely filed its 2004 corporate annual report in January of 2004, and timely paid the fee of \$150. The check, number #1037, for \$150 cleared the shareholders account on January 28, 2004. Unfortunately, the original corporate annual report filed did not report the corporations tax identification number. For this reason, the report was returned to the taxpayer. The taxpayer promptly completed the annual report and mailed it back to the Division of Corporations.

Upon receiving this notice of intent to dissolve, I contacted the Division of Corporations and explained the situation. A review of the taxpayers account shows that the taxpayer has a credit for the \$150 paid in January 2004. The representative at the Division of Corporations requested that the taxpayer sign a new annual report for 2004 and mail it with a letter explaining this error.

Please adjust your records to show that the taxpayer did file its 2004 annual report and pay the fee due of \$150. Thank you in advance for your assistance with this matter. If I can be of any assistance you may contact me at 954-452-8200.

Respectfully,

 C.P.A.

David J. Doddo, C.P.A.

Enclosures