

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000122403

1. Entity Name
INVESTMENTS 2258, INC.



Principal Place of Business
320 S FLAMINGO RD
PEMBROKE PINES, FL 33027

Mailing Address
320 S FLAMINGO RD
PEMBROKE PINES, FL 33027



DO NOT WRITE IN THIS SPACE

04062005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-1563393

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DIEZ, FELIPE D
320 S. FLAMINGO RD
PEMBROOK PINES, FL 33027

**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, 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 D
NAME AZUJE, MANUEL
STREET ADDRESS 320 S FLAMINGO RD
CITY-ST-ZIP PEMBROKE PINES, FL 33027

TITLE D
NAME BARRETO, AMARILIS
STREET ADDRESS 320 S FLAMINGO RD
CITY-ST-ZIP PEMBROKE PINES, FL 33027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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04/26/05-80082-022 150.00

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Felipe D. Diez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/07/05
Date

9544355
Daytime Phone if