## 2004 FOR PROFIT CORPORATION

## May 07, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P03000145395 05-07-2004 90133 050 \*\*\*150.00 1. Entity Name PAISANO TIMES COM INC. Principal Place of Business Mailing Address 212 SE 19TH TERRACE 212 SE 19TH TERRACE 54053401 CAPE CORAL, FL 33990 CAPE CORAL, FL 33990 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05042004 CR2E034 (10/03) 4. FEI Number 59-3775303 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RESTREPO, JOHNNY Street Address (P.O. Box Number is Not Acceptable) 212 SE 19TH TERRACE CAPE CORAL, FL 33990 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 SIGNATURE me of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Openio (In FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE ☐ Change ☐ Addition RESTREPO, JOHNNY NAME NAME STREET ADDRESS 212 SE 19TH TERRACE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33990 CITY-ST-ZIP TITLE Delete TITLE Change Addition BAIRON, CALLE NAME STREET ADDRESS 819 NICHOLAS PKWY WEST STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33991 CITY-ST-ZIP TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ... ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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 an address, with all other like empowered.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

**FILED** 

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May 4, 2004

To: Secretary Of State Glenda E. Hood

Madam:

I, Johnny Restrepo, president of the corporations, "Florida One Stop Marketing, Inc." with Florida Registration # P0300092075, and "Paisano—Time Com, Inc." with Florida Registration # P03000145395, by the present am coming to ask for an abate of penalties for late filing of form UBR. The reason I filed form UBR late is due that I was out of town for the term of fifteen days for a familiar situation. My sister was sick in very bad condition and I had to take care of her. When I returned yesterday, after the form UBR was due, I did not have more options to sent returns late.

Thankfully for your attention and promptly answer.

Respectfully yours,

Johnny Restrepo

President: "Florida One Stop Marketing, Inc."

"Paisano Time Com, Inc."

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