


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005 8:00 am
Secretary of State

06-17-2005 90004 011 ***150.00

DOCUMENT # P04000012939


1. Entity Name
C. MARTINEZ STRUCTURES CORPORATION



Principal Place of Business
**435 HIALEAH DR 2ND FLR STE 5
 HIALEAH, FL 33010**

Mailing Address
**435 HIALEAH DR 2ND FLR STE 5
 HIALEAH, FL 33010**

2. Principal Place of Business 435 HIALEAH DR		3. Mailing Address 435 HIALEAH DR	
Suite, Apt. #, etc. SUITE 9		Suite, Apt. #, etc. SUITE 9	
City & State HIALEAH		City & State HIALEAH	
Zip FL	Country USA	Zip	Country



06132005 Chg-P CR2E034 (10/03)

4. FEI Number
20-0658683

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MARTINEZ, CARLOS O
 2316 BAY DR #16
 MIAMI BCH, FL 33141**

7. Name and Address of New Registered Agent

Name
MARTINEZ, CARLOS O.

Street Address (P.O. Box Number is Not Acceptable)
7020 RUE GRANVILLE

City
MIAMI BEACH **FL** Zip Code
33141

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
 Due by September 7, 2005**

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 STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, CARLOS O 2316 BAY DR #16 MIAMI BCH, FL 33141	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SILES, NORMA SUSANA 2316 BAY DR #16 MIAMI BCH, FL 33141	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, CARLOS O. 7020 RUE GRANVILLE MIAMI BEACH, FL 33141	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SILES, NORMA SUSANA 7020 RYE GRANVILLE MIAMI BEACH . FL 33141	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 an address, with all other like empowered.

SIGNATURE: *Carlos O. Martinez* **06-13-05**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

66625003

Miami, July 18, 2005

Florida Dept of State
Div. Corporations
PO Box 6327
Tallahassee, Fl, 32314

Subject: C.MARTINEZ STRUCTURES CORPORATION
P01000012939

Dear Sir or Madame:

Regarding your notice dated June 17, 2005 .

I filed my corporation report on June 13/2005 and send \$150.00 for fee profit annual report, because my corporation did not receive the prior notice in adequate date.

I filing sending a fee for \$150.00 in accordance with s. 607.193(2)(b) FS:

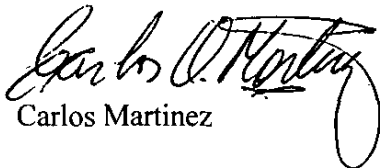
"In addition to the fees levied under ss. 607.0122, 608.452 and 620.182 and the supplemental corporate fee, a late charge of \$400 shall be imposed if the supplemental corporate fee is remitted after May 1 except in circumstances in which a business entity did not receive the uniform business report prescribed by the department"

I can't understand why your Office did not been filed my report and holding it until I send the \$400 for late fee.

I'll appreciate if you can take in consideration the above statement regarding *I did not receive the prior notice for annual report 2005* and go on to file my annual report.

If you considered other questions or circumstances please notify to me.

Respectfully


Carlos Martinez

ATTACHMENT

06025003
PD 4000012939

Ch. 2001-195

LAWS OF FLORIDA

Ch. 2001-195

(8) The Department of State may use government or private sector contractors in the promotion or provision of any electronic filing services and may discount the filing fee in an amount equal to the convenience charge for such electronic filings.

Section 4. Paragraph (b) of subsection (2) of section 607.193, Florida Statutes, is amended to read:

607.193 Supplemental corporate fee.—

(2)

(b) In addition to the fees levied under ss. 607.0122, 608.452, and 620.182 and the supplemental corporate fee, a late charge of \$400 shall be imposed if the supplemental corporate fee is remitted after May 1 except in circumstances in which a business entity did not receive the uniform business report prescribed by the department.

Section 5. This act shall take effect July 1, 2001.

Approved by the Governor June 8, 2001.

Filed in Office Secretary of State June 8, 2001.