


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 23, 2005 8:00 am**  
**Secretary of State**

07-21-2005 90028 025 \*\*\*150.00

<b>DOCUMENT # P04000058040</b> 1. Entity Name <b>ANGELES AZULES, INC.</b>					
Principal Place of Business <b>17051 NE 35TH AVENUE SUITE 206 MIAMI FL 33160</b>			Mailing Address <b>17051 NE 35TH AVENUE SUITE 206 MIAMI FL 33160</b>		
2. Principal Place of Business  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>51-0508996</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>RUDOLPH, JASON ESQ. 10800 BISCAYNE BOULEVARD #580 MIAMI FL 33161</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <b>CASTANO, ARGENSOLA</b> <b>17051 NE 35TH AVENUE #206</b> <b>MIAMI FL 33160</b> <input type="checkbox"/> Delete		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"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>Argensola Castano</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

ATTACHMENT

6602626-2  
# PD400058040

Argensola Castano  
17051 NE 35 Ave, #206  
North Miami Beach, FL 33160

July 18, 2005

**VIA U.S. MAIL**

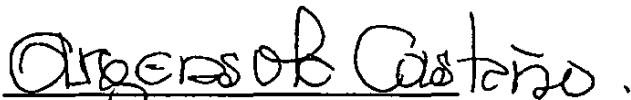
Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

**Re: 2005 Annual Report  
Angeles Azules, Inc.**

Dear Sir/Madam:

Please find enclosed our check number 1017 in the amount of \$150.00 for the annual fees associated with the above-referenced corporation. Please be advised that we did not receive the original notice for this year's renewal. As such, please accept the enclosed check as payment in full for the 2005 annual report. Thanking you in advance.

Sincerely,



Argensola Castano, Director  
Angeles Azules, Inc.



ATTACHMENT

66026265

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

July 25, 2005

ANGELES AZULES, INC.  
17051 NE 35TH AVENUE  
SUITE 206  
MIAMI, FL 33160

Subject: ANGELES AZULES, INC.

Reference Number: P04000058040

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS

ANNUAL REPORTS SECTION