

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000066472

1. Entity Name
NEGOCIACIONES GANADERAS INC.



Principal Place of Business
20201 N.E. 29TH CT.
APT D-110
AVENTURA, FL 33180

Mailing Address
3225 JOHNSON STREET
HOLLYWOOD, FL 33021



04242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRANTON, NORMA
20201 N.E. 29TH CT.
APT D-110
AVENTURA, FL 33180

**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, 2008 Fee will be \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GUTIERREZ, ABRAHAM
STREET ADDRESS 3225 JOHNSON ST.
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE VD
NAME GRANTON, NORMA
STREET ADDRESS 3225 JOHNSON ST.
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE TD
NAME GUTIERREZ, ABRAHAM
STREET ADDRESS 3225 JOHNSON ST.
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE SD
NAME GUTIERREZ, VARYURI V
STREET ADDRESS 20201 N.E. 29TH CT. D-110
CITY-ST-ZIP AVENTURA, FL 33180

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000929778
05/21/08-80084-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

4/24/2008

Date

Daytime Phone #