

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000079677

1. Entity Name
MINBE CO., INC.



FILED
Mar 23, 2007 8:00 A.M.
Secretary of State

Principal Place of Business
3601 NEBRASKA AVENUE
TAMPA, FL 33603

Mailing Address
3601 NEBRASKA AVENUE
TAMPA, FL 33603



03022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1138165
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MENENDEZ, CARLOS
3601 NEBRASKA AVENUE
TAMPA, FL 33603

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

00095929160
04/05/07--01061--001 **617.50

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PT
MENENDEZ, CARLOS
4128 SALTWATER BLVD.
TAMPA, FL 33615

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VT
SMITH, JAMES W
24307 TWIN LAKE DRIVE
LAND O' LAKES, FL 34639

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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:

CARLOS MENENDEZ

3/6/07

813-223-2227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #