

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000082948

1. Entity Name

BELMONTES FARM NURSERY INC.



Principal Place of Business

1708 SW 8TH STREET
HOMESTEAD, FL 33030

Mailing Address

1708 SW 8TH STREET
HOMESTEAD, FL 33030

DO NOT WRITE IN THIS SPACE

FILED
Jul 22, 2008 08:00 AM
Secretary of State



07192008 No Chg-P CR2E034 (11/05)

4. FEI Number
41-2138865

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BELMONTES, ROMAN
1708 SW 8TH STREET
HOMESTEAD, FL 33030

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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 *Roman Belmontes*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7/19/08

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

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 PD
NAME BELMONTES, ROMAN
STREET ADDRESS 1708 SW 8TH STREET
CITY-ST-ZIP HOMESTEAD, FL 33030

TITLE VD
NAME GARCIA, BERTHA
STREET ADDRESS 1708 SW 8TH STREET
CITY-ST-ZIP HOMESTEAD, FL 33030

TITLE
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STREET ADDRESS
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CITY-ST-ZIP

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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 *Roman Belmontes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #