

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # P04000125966

1. Entity Name

PERAMOS ENTERPRISE, INC.



Principal Place of Business

5361 NW 123RD TERRACE
CORAL SPRINGS, FL 33076

Mailing Address

5361 NW 123RD TERRACE
CORAL SPRINGS, FL 33076



01202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1580738

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RAMOS, EDDIE
5361 NW 123RD TERRACE
CORAL SPRINGS, FL 33076

**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 \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000900781
04/29/08-80041-021 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME RAMOS, EDDIE
STREET ADDRESS 5361 NW 123RD TERRACE
CITY-ST-ZIP CORAL SPRINGS, FL 33076

TITLE D
NAME RAMOS, JENNIFER
STREET ADDRESS 5361 NW 123RD TERRACE
CITY-ST-ZIP CORAL SPRINGS, FL 33076

TITLE D
NAME MARTI-PEREZ, SUSANA
STREET ADDRESS 5361 NW 123RD TERRACE
CITY-ST-ZIP CORAL SPRINGS, FL 33076

TITLE D
NAME PEREZ, ALFREDO
STREET ADDRESS 5361 NW 123RD TERRACE
CITY-ST-ZIP CORAL SPRINGS, FL 33076

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: _____

Eddie Ramos EDDIE RAMOS 4-13-08 954-980-1073

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #