

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 12, 2005 8:00 am
Secretary of State

09-12-2005 90003 040 ***550.00

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1. Entity Name

CACHE TRANSMISSION SERVICES, CORP.



Principal Place of Business

685 NW 29TH STREET
MIAMI FL 33127

Mailing Address

685 NW 29TH STREET
MIAMI FL 33127

2. Principal Place of Business

685 NW 29th Street

Suite, Apt. #, etc.

3. Mailing Address

685 NW 29th Street

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

Miami Florida

City & State

Miami, Florida 33127

4. FEI Number

20-1654164

Applied For

Not Applicable

Zip

33127

Country

U.S.A., MIAMI, DADE

Zip

33127

Country

U.S.A., MIAMI, DADE

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIVERA, EDUARDO SANTOS
685 NW 29TH STREET
MIAMI FL 33127

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PVS ☐ Delete
NAME RIVERA, EDUARDO SANTOS
STREET ADDRESS 4765 SW 4TH STREET
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVS ☒ Change ☐ Addition
NAME EDUARDO, SANTOS RIVERA
STREET ADDRESS 13908 SW 144TH AVE
CITY-ST-ZIP MIAMI, FL 33186

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Eduardo Santos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-7-05 305-635-5112

Date

Daytime Phone #