

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 06, 2005 8:00 am
Secretary of State

09-06-2005 90134 041 ***150.00

DOCUMENT # P04000157032

1. Entity Name

RAFAEL 21726 CORP.



Principal Place of Business

21726 ARBIBA REAL, BLDG. 35-A
BOCA LARGO
BOCA RATON FL 33433

Mailing Address

21726 ARBIBA REAL, BLDG. 35-A
BOCA LARGO
BOCA RATON FL 33433



2. Principal Place of Business

3. Mailing Address

40 Pamela Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Staten Island

City & State

City & State

New York, NY

Zip

Country

Zip

Country

10304-4437

USA

2nd MOORE

CR2E034 (5/05)

4. FEI Number

NO

Applied For

NONE

EMPLOYEES

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BADACH, FRANK J
6070 NORTH FEDERAL HWY.
SUITE 110
BOCA RATON FL 33487

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 \$550.00

DUE BY September 7, 2005

Make Check Payable to Florida Department of State

S.607, 193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME RIZZA, JEANNETTE
STREET ADDRESS 40 PAMELA LANE
CITY-ST-ZIP STATEN ISLAND NY 10304-4437

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 27, 05 / 718 8189096

Date

Daytime Phone #

ATTACHMENT

Jeanette Rizo

40 Pamela Lane
Staten Island
New York 10304 4437

1- 718 818 9096
JeanetteR62@aol.com

August 28, 2005

Dear Sir:

Enclosed please find:

① A check for \$150

② 2005 For Profit Corporation
Annual Report (AR)

I did not receive prior notice.

Additionally this corp has NO
employees, and has been totally
inactive to date.

Sincerely
Jeanette Rizo