

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000160021

1. Entity Name
TEAM WORK CORPORATION



Principal Place of Business
703 N SWEETWATER BLVD.
LONGWOOD, FL 32779

Mailing Address
703 N SWEETWATER BLVD.
LONGWOOD, FL 32779

FILED
Apr 10, 2007 08:00 A
Secretary of State



03312007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1934050

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROMERO, JORGE
703 NORTH SWEETWATER BLVD
LONGWOOD, FL 32779

**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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CASTRILLON, ALCIBIADES 206 MAGNOLIA LAKE DR LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROMERO, JORGE 703 NORTH SWEETWATER BLVD LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GUTIERREZ, ANDRES 100 BAYVIEW DR #1415 SUNNY ISLE BEACH, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD NINO, JOSE 9955 E BAY HARBOR ISLAND APT 6B BAL HARBOR, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PORTOCARRERO, MIGUEL 2011 SW 134 AVENUE MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000697337
04/18/07-80037-010 150.00

**DO NOT WRITE
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: *Jorge Romero* **JORGE ROMERO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY *04-05-07*
(321) 460-7142

Date Daytime Phone #