2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000160855

1. Entity Name
FAGUNDO DOOR'S INC

Principal Place of Business	Mailing Address
14610 SW 296 ST HOMESTEAD, FL 33033	14610 SW 296 ST HOMESTEAD, FL 33033

DO NOT WRITE IN THIS SPACE

02172008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-1935913	Not Applicable

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

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6. Name and Address of Current Registered Agent

FAGUNDO, VICTOR
14610 SW 296 ST
HOMESTEAD, FL 33033

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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

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	FAGUNDO, VICTOR
STREET ADDRESS	14610 SW 296 ST
CITY-ST-ZIP	HOMESTEAD, FL 33033

TITLE	
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02/28/08-80031-010 158.75

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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 all other like empowered.

SIGNATURE: _____   02/18/08   (786) 597 6752

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #