

4/3/21

FILED
Jun 05, 2006 8:00 am
Secretary of State

04-03-2006 90364 024 ***158.75

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P05000054131 1. Entity Name 12 ELEVEN CORPORATION					
Principal Place of Business 13730 S.W. 147 CIRCLE LANE STE 4 MIAMI, FL 33186			Mailing Address 13730 S.W. 147 CIRCLE LANE STE 4 MIAMI, FL 33186		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 02112008 Chg-P CR2E034 (11/05)	
5. Certificate of Status Desired ☒				Applied For ☒ Not Applicable	
6. Name and Address of Current Registered Agent DEPOORTER, DIRK C 13730 S.W. 147 CIRCLE LANE STE 4 MIAMI, FL 33186					
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$850.00			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 NAME STREET ADDRESS CITY - ST - ZIP	DP PRIVAT, EDUARDO G 13730 S.W. 147 CIRCLE LANE STE 4 MIAMI, FL 33186		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			5/30/06 786 3800388 Date Daytime Phone #		

Bank of America | Account Activity | Transaction Image Screen

Bank of America  Higher Standards

ATTACHMENT

66017789

194000001408

Online

Accounts	Bill Pay & e-Bills	Transfer Funds	Investments	Customer Service
Accounts Overview	Account Activity	Account Summary	Find a Transaction	Open an Account

Check Image - Front

Posting Date: 04/06/2006

Check #: 104

Amount: \$158.75

Reference: 85740543198

Account: DDA-5900

Nickname:

Bank of America Advantage		104
EDUARDO G. PRIVAT	03-05	ES-4630 EL
15730 S.W. 147TH CIR. UNL APT. NO. 4		1112
MIAMI, FL 33186	Date 03/15/2006	
Pay to the order of Florida Department of State	\$ 158.75	
One hundred fifty eight	75/100	Dollars
Bank of America	Advantage	
ACH PUT 005100277		
Memorandum		

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