## 2008 FOR PROFIT CORPORATION

## Aug 26, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P05000084875** 08-26-2008 90001 042 \*\*\*150.00 DULZORI GOURMET CREATIONS, INC. Principal Place of Business Mailing Address 543 NW 118 AVE 543 NW 118 AVE 40114359 CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08212008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 03-0601806 Not Applicable Zin Country Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUZMAN, ZORAIDA M Street Address (P.O. Box Number is Not Acceptable) 543 NW 118 AVE CORAL SPRINGS, FL 33071 City Zip Code FL 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. Lam familiar with, and accept the obligations of registered agent Zoraida M. Segueira, DV 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees Due by September 12, 2008 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP ☐ Delete TITLE Liciaga, Zoraida NAME SEQUEIRA, ZORAIDA L NAME 4 STREET ADDRESS 75 LIMONCILLO ST EXT SANTA MARIA STREET ADDRESS CITY-ST-7P SAN JUAN, 00927 CRY-ST-ZP TITLE □ Delete TITLE ☐ Change ■ Addition NAME SEQUEIRA, RODOLFO NAME STREET ADORESS 75 LIMONCILLO ST EXT SANTA MARIA STREET ADDRESS CITY-ST-ZIP SAN JUAN, 00927 CITY-ST-ZIP D۷ TITI E ☐ Delete Sequeira, Zoraida ■ Addition GUZMAN, ZORAIDA M NAME NAME .... STREET ADDRESS 543 NW 118 AVE STREET ADORESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 CRY-ST-ZP Sequeira, Juan R. #1 Street, J-24 ☐ Delete TITLE ☐ Addition NAME -NAME **GUZMAN, JUAN CARLOS** STREET ADDRESS 543 NW 118 AVE STREET ADDRESS CITY-ST-ZP CORAL SPRINGS, FL 33071 CITY-ST-ZIP TIRE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

☐ Change

■ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Horida 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.

CITY-ST-7IP

STREET ADORESS

TITLE

NAME

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

M. Sequeira DV aug 21, 08

August 21, 2008

## **ATTACHMENT** 40114359

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

To whom it may concern:

Please enclosed find check #128 for the amount of \$150.00 for payment of annual report, document #P05000084875 I have not yet received any notification of payment of the Annual Report for my company and as the September deadline approaches I needed to make my payment around this date. For future references my address is 543 NW 118 Ave., Coral Springs, FL 33071.

Thanks for your attention,

OWW Zoraida M. Sequeira

Dulzori Gourmet Creations, Inc.