

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90276 049 ***150.00

DOCUMENT # P05000127085					
1. Entity Name I & R DOORS AND FINISHING, CORP.					
Principal Place of Business 2613 TARPON DRIVE MIRAMAR, FL 33023			Mailing Address 2613 TARPON DRIVE MIRAMAR, FL 33023		
2. Principal Place of Business 7255 NW 68 St Suite, Apt. #, etc. # 5 City & State Miami FL Zip 33166 Country USA		3. Mailing Address 7255 NW 68 St Suite, Apt. #, etc. # 5 City & State Miami FL Zip 33166 Country USA			
4. FEI Number 20-3506172				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				01042006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent SUAREZ, RAUL 2613 TARPON DRIVE MIRAMAR, FL 33023			7. Name and Address of New Registered Agent Name <u>Raul Suarez</u> Street Address (P.O. Box Number is Not Acceptable) <u>7255 NW 68 st # 5</u> City <u>Miami</u> State <u>FL</u> Zip Code <u>33166</u>		
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: <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>1/4/06</u>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing ☐ \$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	P <u>Raul Suarez</u> <u>7255 NW 68 St #5</u> <u>Miami FL 33166</u>	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ 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: <u>[Signature]</u> SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>1/4/06</u> (954) 986-4223 Daytime Phone #		