

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 08:00 A
Secretary of State

DOCUMENT # P06000011427

1. Entity Name
DRS DRAFTING AND RENDERING SERVICES, CORP.



Principal Place of Business
2451 BRICKELL AVE
SUITE 14 P
MIAMI, FL 33129

Mailing Address
2451 BRICKELL AVE
SUITE 14 P
MIAMI, FL 33129



03102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4189833

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BARRERA, PAOLA
2451 BRICKELL AVE
SUITE 14 P
MIAMI, FL 33129

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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, 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	PD
NAME	BARRERA, PAOLA
STREET ADDRESS	2451 BRICKELL AVE, SUITE 14 P
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	VPD
NAME	MONROY, CAMILO
STREET ADDRESS	2451 BRICKELL AVE, SUITE 14 P
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/27/08-80062-002 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Camilo Monroy Camilo Monroy 3/16/08