

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

5/7/2007-90074-017 \$150.00-\$150.00

2007 NOV 16 AM 11:56

FILED

1/2

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P06000016559

1. Entity Name  
SUSELL CORPORATION



Principal Place of Business  
630 NE 3 PLACE  
HIALEAH, FL 33010 US

Mailing Address  
630 NE 3 PLACE  
HIALEAH, FL 33010 US

REINSTATEMENT 07



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number  
20-4272972

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPEZ DE QUERALTA, ALFREDO  
630 NE 3 PLACE  
HIALEAH, FL 33010

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

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, 2007 Fee will be \$550.00

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  
P  
LOPEZ DE QUERALTA, ALFREDO  
630 NE 3 PLACE  
HIALEAH, FL 33010 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

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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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/07

Date

Daytime Phone #

11/21/07

**October 12,2007**

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

**Subject: SUSSELL CORPORATION**

**Reference: P06000016559**

**Dear sirs:**

**I am very surprised to have received your Notice of Dissolution.**

**On May 22/07,I received your letter asking to complete Block 4, FEI.**

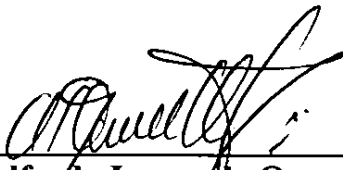
**I answered that letter on June 1<sup>st</sup>/07 providing you with that information.**

**Attached please find copy of your letter and the Annual Report with Block 4 completed.**

**I kindly request to review your records because the Annual Report was filed on time and the check for \$150.00 was paid by the bank.**

**Thanking in advance for your help in this matter.**

**Cordially,**

  
\_\_\_\_\_  
**Alfredo Lopez de Queralta**