


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 06, 2007 8:00 am**  
**Secretary of State**

02-08-2007 90037 041 \*\*\*150.00

<b>DOCUMENT # P06000081958</b>		
1. Entity Name <b>NAVARRO BUSINESS OFFICE CORP</b>		

Principal Place of Business <b>1170 SW 6TH STREET MIAMI, FL 33130</b>	Mailing Address <b>1170 SW 6TH STREET MIAMI, FL 33130</b>
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2. Principal Place of Business - No P.O. Box # <b>1170 SW 6 STREET</b>		3. Mailing Address <b>1170 SW 6 STREET</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>MIAMI FL</b>		City & State <b>MIAMI FL</b>	
Zip <b>33130</b>	Country <b>USA</b>	Zip <b>33130</b>	Country <b>USA</b>

**66020094**



06302007 Chg-P CR2E034 (12/06)

4. FEI Number <b>20-5455607</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent <b>NAVARRO, EDITH E 1170 SW 6TH STREET MIAMI, FL 33130</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 \$550.00  
Due by September 14, 2007**

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	<b>P NAVARRO, EDITH E 1170 SW 6TH. STREET MIAMI, FL 33130</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** **EDITH NAVARRO** *Edith Navarro*

06-30-2007

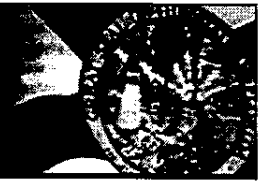
305-860-6548

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

60020094

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS[Home](#)[Contact Us](#)[E-Filing Services](#)[Document Searches](#)[Forms](#)[Help](#)

## 2007 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

**\*\* This information cannot be changed on the report. \*\***

**Document Number** P06000081958

**Business Entity Name** NAVARRO BUSINESS OFFICE CORP

**Original File Date** 06/08/2006

**FEI Number**

**Principal Address** 1170 SW 6TH STREET  
MIAMI, FL 33130

**Mailing Address** 1170 SW 6TH STREET  
MIAMI, FL 33130

**Registered Agent** EDITH E NAVARRO  
1170 SW 6TH STREET  
MIAMI, FL 33130 US

**Officer/Director Name And Address**

P  
EDITH E NAVARRO  
1170 SW 6TH STREET  
MIAMI, FL 33130

- ☐ **After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances which the entity did not receive prior notice. Please check this box if notice was not received.**

[Continue](#)

ATTACHMENT  
66020094

June 30, 2007

Florida Department of State  
Division of Corporation

Subject: Missing File from Navarro Business Office

Reference Number: P06000081958

Dear Sir:

Enclosed a photocopy of your first answer date Feb.15, 2007. I did file with the mistake of the SS number wrote as FEI.

I did fix the error and send by mail the report with the SS4 number include in the application. The check of fee was #1210 from the Bank of Wachovia.

It surprise me that the document were not received to your office.

Please contact me as soon as possible to my telephone 305-860-6548 if you need any other information.

I thank you for your time,

Very Truly

  
Edith Navarro

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

2/8/2007-90037-041-\$150.00-\$150.00

**DOCUMENT # P06000081958**

1. Entity Name  
**NAVARRO BUSINESS OFFICE CORP**



**ATTACHMENT**

Principal Place of Business  
**1170 SW 6TH STREET  
MIAMI, FL 33130**

Mailing Address  
**1170 SW 6TH STREET  
MIAMI, FL 33130**

2. Principal Place of Business - No P.O. Box #  
**1170 SW 6th Street**  
Suite, Apt. #, etc.

3. Mailing Address  
**1170 SW 6th Street**  
Suite, Apt. #, etc.

**66020094**

01192007 Chg-P CR2E034 (12/06)

City & State  
**Miami Florida**  
Zip  
**33130**

City & State  
**Miami FL 33130**  
Zip  
**33130**

4. FEI Number  
**20-5455607**  
Applied For  
☒ Not Applicable

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

6. Name and Address of Current Registered Agent

**NAVARRO, EDITH E  
1170 SW 6TH STREET  
MIAMI, FL 33130**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

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

TITLE	P	<input type="checkbox"/> Delete
NAME	NAVARRO, EDITH E	
STREET ADDRESS	1170 SW 6TH. STREET	
CITY-ST-ZIP	MIAMI, FL 33130	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		

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SIGNATURE:

**Edith Navarro (Edith Navarro)**

**2/4/2007 (305) 860.6548**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

**EMELIA NAVARRO** D/B/A NAVARRO BUSINESS OFFICE

Florida Department of State

ATTACHMENT

1/6/2007

1210

150.00

66020094

#PD6000081958

Wachovia Bank

P0600081958

150.00

**EDITH EMELIA NAVARRO** D/B/A NAVARRO BUSINESS OFFICE

Florida Department of State

1/6/2007

150.00

Wachovia Bank

P0600081958

150.00