

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90237 020 ***150.00

DOCUMENT # P07000115390 1. Entity Name A V TEC. DIE MOLD CORP.					
Principal Place of Business 11201 SW 55TH ST. BOX 510 MIRAMAR, FL 33025			Mailing Address 11201 SW 55TH ST. BOX 510 MIRAMAR, FL 33025		
2. Principal Place of Business - No P.O. Box # 2575 SW 27 AVE		3. Mailing Address 2575 SW 27 AVE			
Suite, Apt. #, etc. 208		Suite, Apt. #, etc. 208			
City & State Miami		City & State Miami			
Zip 33133	Country		Zip 33133	Country	
4. FEI Number 26-1381016			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent VICENTE, JESUS A 11201 SW 55TH ST. BOX 510 MIRAMAR, FL 33025			7. Name and Address of New Registered Agent Name Ramon E. Vicente Street Address (P.O. Box Number is Not Acceptable) 2575 SW 27 AVE apt 208 City Miami FL Zip Code 33133		
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 Ramon E. Vicente President 4/30/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PDV VICENTE, JESUS A 11201 SW 55TH ST. BOX 510 MIRAMAR, FL 33025		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDV Ramon E. Vicente 2575 SW 27 AVE apt 208 Miami, FL 33133	
<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<input type="checkbox"/> Delete			<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: Ramon E. Vicente President 4/30/08 305-522-0338 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					