2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 18, 2005 08:00 AM Secretary of State

305)525-1456

	ANNUAL	REPORT	
DOCUMENT :		539	
1 - Satitu Nama			



I COUNTY HOUSE			
ONE HUNDRED AN	TENTH AVENUE	PROPERTY,	INC

Principal Place of Business

Mailing Address

1955 NW 110TH AVE MIAMI, FL 33172

SIGNATURE:

1955 NW 110TH AVE MIAMI, FL 33172

) to market the later minit	Marti malti matil	Maine fillt eillet eilt	19 (ilik inimel (i ise)

DO NOT WRITE IN THIS SPA	C	A	P	S	•	S	I	4	"}	٦	V	. 11	ľE	П	7	/F	٨	V	T	O	J	N	0)	I
--------------------------	---	---	---	---	---	---	---	---	----	---	---	------	----	---	---	----	---	---	---	---	---	---	---	---	---

02152005	No Chg-P	CR2E034 (10/03)	
4. FEI Numbe	T	Applied For	-
65-0497	7748	Not Applica	ÿ

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

RICHARD GONZALEZ

1955 N.W. 110 AVE.
MIAMI, FLA
MIAMI, FLA

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the	purpose of changing its registere	ed office of registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.		Tanaltable Bittle Gospone	Agent signature required when reinstating)	DATE
	E NOWILL FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		DAIL
10. TITLE NAME	P RICHARD GONZALEZ	CTORS	. ,	
STREET ADDRESS CITY-ST-ZIP	1955 N.W. 110 AVE MIAMI, FL		-	V00000235015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AMY GONZALEZ 1955 N.W. <u>1</u> 10 AVE. MIAMI, FL	- - 	 	02/18/05-80045-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GONZALEZ, RICHARD %1955 NW 110TH AVE MIAMI, FL 33172		DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP	DS GONZALEZ, AMY %1955 NW 110TH AVE MIAMI, FL 33172		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby of indicated of the corchanged.	certify that the information supplied with this f I on this report of supplemental report is true poration or the receiver or trusted empowere , or on an attachment with an address, with a	filing does not qualify for the exer and accurate and that my signate of to execute this report as requir fother like empowered.	nption stated in Section 119 07(3) are shall have the same legal effe ed by Chapter 607, Florida Statut	(i), Florida Statutes I further certify that the information of as if made under oath, that I am an officer or director es, and that my name appears in Block 10 or Block 11 if