

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 22, 2008 8:00 am**  
**Secretary of State**

04-22-2008 90021 021 \*\*\*150.00

**DOCUMENT # P94000072194**

1. Entity Name

CELGIO, INC.



Principal Place of Business

13470 SW 128TH ST  
MIAMI FL 33186  
US

Mailing Address

13470 SW 128TH ST  
MIAMI FL 33186  
US



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

3. Mailing Address

1st MOORE

CR2E034 (10/07)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0528041

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

HERNANDEZ, HOSEY  
2701 S BAYSHORE DR  
SUITE 602  
MIAMI FL 33133

Name

Tobin, Gerald J P. A.

Street Address (P.O. Box Number is Not Acceptable)

2701 South Bayshore Drive

Suite 602

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

*Celso Corrales*

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

(NOTE: Registered Agent signature required when removing)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2008 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

|                 |                    |                                 |
|-----------------|--------------------|---------------------------------|
| TITLE           | D                  | <input type="checkbox"/> Delete |
| NAME            | CORRALES, CELSO    |                                 |
| STREET ADDRESS  | 13470 SW 128TH ST  |                                 |
| CITY - ST - ZIP | MIAMI FL 33186     |                                 |
| TITLE           | VP                 | <input type="checkbox"/> Delete |
| NAME            | CORRALES, JEANETTE |                                 |
| STREET ADDRESS  | 13470 SW 128TH ST  |                                 |
| CITY - ST - ZIP | MIAMI FL 33186     |                                 |
| TITLE           |                    | <input type="checkbox"/> Delete |
| NAME            |                    |                                 |
| STREET ADDRESS  |                    |                                 |
| CITY - ST - ZIP |                    |                                 |
| 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 |
| NAME            |  |                                                                   |
| STREET ADDRESS  |  |                                                                   |
| CITY - ST - ZIP |  |                                                                   |
| TITLE           |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME            |  |                                                                   |
| STREET ADDRESS  |  |                                                                   |
| CITY - ST - ZIP |  |                                                                   |
| TITLE           |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME            |  |                                                                   |
| STREET ADDRESS  |  |                                                                   |
| CITY - ST - ZIP |  |                                                                   |
| TITLE           |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME            |  |                                                                   |
| STREET ADDRESS  |  |                                                                   |
| CITY - ST - ZIP |  |                                                                   |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Celso Corrales*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/2008 305233-4555

Date

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