

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90048 048 ***158.75

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1. Entity Name
AQUA ROJAS, CORP.



Principal Place of Business
**1997 SW 17 CT RD
MIAMI, FL 33145 US**

Mailing Address
**16550 NW 20TH STREET
PEMBROKE PINES, FL 33028 US**

40075546



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03282008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

65-0559570

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

**MUFDY, TERESA
16550 NW 20TH STREET
PEMBROKE PINES, FL 33028**

Name
ANTHONY D. ROJAS

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

400 NW. 25 AVE

MIAMI, FLORIDA. 33125

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
COMPANIONI, MIRIAM C
2401 SW 4 AVE
MIAMI, FL 33129** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MUFDY, TERESA
16560 NW 20TH STREET
PEMBROKE PINES, FL 33028** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
ROY, RUSSELL
8250 SW 182ND STREET
MIAMI, FL 33157** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
ROJAS, ANTHONY J
16550 NW 20TH STREET
PEMBROKE PINES, FL 33028** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PRESIDENT
ROJAS, ANTHONY J
400 NW. 25 AVE** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MIAMI, FLORIDA. 33125 ☐ Change ☐ Addition

TITLE
NAME
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #