

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90044 006 ***150.00

DOCUMENT # P95000023704

1. Entity Name

P F INTERNATIONAL ASSOCIATES, INC.



Principal Place of Business

9624 NW 7 CIRCLE
SUITE 1522
PLANTATION FL 33324

Mailing Address

9624 NW 7 CIRCLE SUITE 1522
PLANTATION FL 33324

2. Principal Place of Business

111 N.E. 2nd AVE

3. Mailing Address

111 N.E. 2nd AVE

Suite, Apt. #, etc.

Ap. 1502

Suite, Apt. #, etc.

Ap. 1502

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33132

Country

USA

Zip

33132

Country

USA

4. FEI Number

65-0566482

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAIVA, RICARDO
9624 NW 7 CIRCLE
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

111 N.E. 2nd Avenue Ap. 1502

City

MIAMI

FL

Zip Code

33132

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, 2004: 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 S ☐ Delete
NAME ALVES, ANDREEIA P
STREET ADDRESS 9624 NW 7 CIRCLE #1522
CITY-ST-ZIP PLANTATION FL 33324

TITLE PD ☐ Delete
NAME PAIVA, RICARDO W
STREET ADDRESS 9624 NW 7 CIRCLE # 1522
CITY-ST-ZIP PLANTATION FL 33324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 111 N.E. 2nd AVENUE AD. 1502
CITY-ST-ZIP MIAMI, FL 33132

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 111 N.E. 2nd AVENUE AD. 1502
CITY-ST-ZIP MIAMI, FL 33132

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

02/17/2004

Date

(305) 379-5342

Daytime Phone #