

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2007 8:00 am
Secretary of State

DOCUMENT # P95000031433

1. Entity Name
CAILIL, INC.



Principal Place of Business
200 ALBATROSS STREET
MIAMI SPRINGS FL 33166

Mailing Address
200 ALBATROSS STREET
MIAMI SPRINGS FL 33166



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 65-0576428

Applied For
Not Applicable

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

IGLESIAS, CARLOS A
200 ALBATROSS STREET
MIAMI SPRINGS FL 33166

Name LILLIAM IGLESIAS

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

200 ALBATROSS STREET

City MIAMI SPRINGS

FL

Zip Code 33166

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

Lillian Iglesias

LILLIAM IGLESIAS, President 3/31/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME OGLESIAS, LILLIAN
STREET ADDRESS 200 ALBATROSS ST
CITY- ST- ZIP MIAMI SPRINGS FL
☒ Delete

TITLE DP
NAME LILLIAM IGLESIAS
STREET ADDRESS 200 ALBATROSS STREET
CITY- ST- ZIP MIAMI SPRINGS FL 33166
☒ Change ☐ Addition

TITLE DT
NAME IGLESIAS, CARLOS A JR
STREET ADDRESS 200 ALBATROSS STREET
CITY- ST- ZIP MIAMI SPRINGS FL
☐ Delete

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

TITLE DS
NAME IGLESIAS, CARLOS A
STREET ADDRESS 200 ALBATROSS STREET
CITY- ST- ZIP MIAMI SPRINGS FL
☒ Delete

TITLE DS
NAME LILLIAM IGLESIAS
STREET ADDRESS 200 ALBATROSS STREET
CITY- ST- ZIP MIAMI SPRINGS FL 33166
☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY- ST- ZIP
☐ Delete

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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:

Lillian Iglesias

LILLIAM IGLESIAS

3/31/07

(305) 885-7582

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone