

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90056 048 ***150.00

DOCUMENT # P95000068901

1. Entity Name
JUANRUB, CORP.



Principal Place of Business
**12531 WEST OKEECHOBEE ROAD
HIALEAH, FL 33016**

Mailing Address
**12531 WEST OKEECHOBEE ROAD
HIALEAH, 33016**

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

9797 SW 119 Ave

3. Mailing Address

9797 SW 119 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0606937

Applied For

Not Applicable

Zip

33186

Country

USA

Zip

33186

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RODRIGUEZ, CINDY M
12531 WEST OKEECHOBEE RD.
HIALEAH, FL 33018**

7. Name and Address of New Registered Agent

Name

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

9797 SW 119 Ave

City

Miami FL

Zip Code

33186

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

4-26-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **VEGA, DAMARIS**
STREET ADDRESS **12531 WEST OKEECHOBEE ROAD**
CITY-ST-ZIP **HIALEAH, FL 33016**

TITLE **CEO** ☐ Delete
NAME **RODRIGUEZ, CINDY M**
STREET ADDRESS **12531 WEST OKEECHOBEE ROAD**
CITY-ST-ZIP **HIALEAH, FL 33016**

TITLE **TD** ☐ Delete
NAME **RODRIGUEZ, JUAN**
STREET ADDRESS **12531 WEST OKEECHOBEE ROAD**
CITY-ST-ZIP **HIALEAH, FL 33016**

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 **DP** ☒ Change ☐ Addition
NAME **VEGA, DAMARIS**
STREET ADDRESS **9797 SW 119 Ave**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **SCTY** ☒ Change ☐ Addition
NAME **Rodriguez, Cindy M.**
STREET ADDRESS **9797 SW 119 Ave**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **TD** ☒ Change ☐ Addition
NAME **Rodriguez, Juan**
STREET ADDRESS **9797 SW 119 Ave**
CITY-ST-ZIP **Miami, FL 33186**

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 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:

Cindy M. Rodriguez 4/26/07 3/22/07 305-59-0450