

FILED
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Secretary of State

03-03-2005 90182 001 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000010683

1. Entity Name
PLAYA DEL ANGEL EXPRESS, INC.



Principal Place of Business
**11326 N.W. 3RD TERRACE
MIAMI, FL 33172**

Mailing Address
**11326 N.W. 3RD TERRACE
MIAMI, FL 33172**

50022400



DO NOT WRITE IN THIS SPACE

02282005 No Chg-P CR2E034 (10/01)

4. FEI Number
65-6639816

Applicable For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DELGADO, ROMELIO A
11326 N.W. 3RD TERRACE
MIAMI, FL 33172**

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IN THIS SPACE**

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, 2005 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
**PD
DELGADO, ROMELIO A
11326 N.W. 3RD TERRACE
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**SD
DELGADO, ANA
11326 N.W. 3RD TERRACE
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

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 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 31; and that I have not 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 Contact

2/27/05