

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000062741

1. Entity Name
AEV 7434 CORPORATION



Principal Place of Business

4444 SW 71ST AVE
SUITE 101A
MIAMI, FL 33176 US

Mailing Address

4444 SW 71ST AVE
SUITE 101A
MIAMI, FL 33155 US

FILED

08 MAY 12 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0684414

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

VEITIA, AGUSTIN
4444 SW 71ST AVE
STE #101B
MIAMI, FL 33155

**DO NOT WRITE
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, 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	PD VEITIA, AGUSTIN 6501 SW 73RD COURT MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD VEITIA, MERCEDES 6501 SW 73RD COURT MIAMI, FL 33143
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	

Handwritten signature

900129593279
05/15/08--01020--012 **150.00

**DO NOT WRITE
IN THIS SPACE**

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

Agustin Veitia 1/9/08 305-669-8375

Date

Daytime Phone #