

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90451 037 ***150.00

DOCUMENT # P97000013920

1. Entity Name

H. F. TOUR & CARGO, INC.



Principal Place of Business

3360 SW 195 TERR.
MIRAMAR FL 33029
US

Mailing Address

3360 SW 195 TERR.
MIRAMAR FL 33029
US



2. Principal Place of Business

21113 Johnson Street

3. Mailing Address

21113 Johnson Street

Suite, Apt. #, etc.

Unit # 119

Suite, Apt. #, etc.

Unit # 119

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0731714

Applied For

Not Applicable

Zip
33029

Country

USA

Zip
33029

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANK, LAURA D
3360 SW 195 TERR.
MIRAMAR FL 33029

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2006 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 PD ☐ Delete
NAME FRANK, MAURICIO H
STREET ADDRESS 3360 SW 195 TERR
CITY-ST-ZIP HOLLYWOOD FL 33029

TITLE D ☐ Delete
NAME FRANK, DANIEL D
STREET ADDRESS 3360 SW 195 TERRACE
CITY-ST-ZIP HOLLYWOOD FL 33029

TITLE VD ☐ Delete
NAME FRANK, LAURA D
STREET ADDRESS 3360 SW 195 TERRACE
CITY-ST-ZIP HOLLYWOOD FL 33029

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
CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
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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 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:

Mauricio Frank

04/27/06

954-499-8807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #