

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90406 042 ***150.00

DOCUMENT # P97000049639 1. Entity Name NACSO CORPORATION																																			
Principal Place of Business 1752 NW 72 AVENUE 1491 NW 103 AV PLANTATION, FL 33343 Plantation, FL 33322 33322			Mailing Address 1752 NW 72 AVENUE 1491 NW 103 AV PLANTATION, FL 33343 Plantation, FL 33322 33322																																
2. Principal Place of Business 1491 NW 103 AVENUE Suite, Apt. #, etc.			3. Mailing Address 1491 NW 103 AVENUE Suite, Apt. #, etc.																																
City & State Plantation, FL			City & State Plantation, FL																																
Zip 33322		Country USA		4. FEI Number 65-0841335																															
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required.				Applied For Not Applicable																															
6. Name and Address of Current Registered Agent SOLANO, FERNANDO 1752 NW 72 AVENUE 1491 NW 103 AV. PLANTATION, FL 33343 Plantation, FL 33322			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																
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  04-28-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> PD SOLANO, FERNANDO 1752 NW 72 AVENUE 1491 NW 103 AV. PLANTATION, FL 33343 Plantation, FL 33322 </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td> SD SOLANO, JULIA INES 1752 NW 72 AVENUE 1491 NW 103 AV. PLANTATION, FL 33343 Plantation, FL 33322 </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td>TITLE</td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE</td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE</td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE</td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td></tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td>TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> </table> </div> </div>						TITLE	PD SOLANO, FERNANDO 1752 NW 72 AVENUE 1491 NW 103 AV. PLANTATION, FL 33343 Plantation, FL 33322	<input type="checkbox"/> Delete	TITLE	SD SOLANO, JULIA INES 1752 NW 72 AVENUE 1491 NW 103 AV. PLANTATION, FL 33343 Plantation, FL 33322	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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:  04-28-04 (305) 510-8660 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																			