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# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-03-2004 91054 023 \*\*\*150.00

|                                                        |                                                                                   |
|--------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # P97000086588</b>                         |  |
| 1. Entity Name<br><b>FIRM INTERNATIONAL GROUP INC.</b> |                                                                                   |

|                                                                              |                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------|
| Principal Place of Business<br><b>712 NW 76TH AVENUE<br/>MIAMI, FL 33126</b> | Mailing Address<br><b>712 NW 76TH AVENUE<br/>MIAMI, FL 33126</b> |
|------------------------------------------------------------------------------|------------------------------------------------------------------|



04302004 No Chg-P CR2E034 (10/03)

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|                                                                                                 |                                                        |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 4. FIC Number<br><b>85-0828080</b>                                                              | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                        |

|                                                                                                                             |  |
|-----------------------------------------------------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent<br><br><b>SANCHEZ, FRANCISCO<br/>712 NW 76TH AVENUE<br/>MIAMI, FL 33126</b> |  |
|-----------------------------------------------------------------------------------------------------------------------------|--|

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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 submitting)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

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

| 10. OFFICERS AND DIRECTORS               |                                                                   |
|------------------------------------------|-------------------------------------------------------------------|
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | P<br>PARTIDA, FLORA IRMA<br>712 NW 76TH AVENUE<br>MIAMI, FL 33126 |
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | VP<br>RIOS, GUADALUPE<br>712 NW 76TH AVENUE<br>MIAMI, FL 33126    |
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | D<br>SANCHEZ, FRANCISCO<br>712 NW 76TH AVENUE<br>MIAMI, FL 33126  |
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                   |
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                   |
| NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                   |

**DO NOT WRITE  
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(9)(b), 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 807, 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 lien encumbrances.

SIGNATURE:

Signature, typed or printed name of signing officer or director

04 / 30 / 04

305139290

Title

Signature/Print Name