

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90045 026 ***150.00

DOCUMENT # P98000026489

1. Entity Name
MIAMI FOLIAGE FORWARDERS, INC.



Principal Place of Business
**7792 NW 71ST STREET
MEDLEY, FL 33166**

Mailing Address
**7792 NW 71ST STREET
MEDLEY, FL 33166**

40052431



03232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0820822

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GONZALEZ, STEVEN
16327 MARIPOSE CIRCLE
PEMBROKE PINES, FL 33311**

**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, 2007 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	PT GONZALEZ, STEVEN 16327 MARIPOSA CIRCLE, PEMBROKE PINES, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GONZALEZ, LAZARA 16327 MARPOSE CIRCLE PEMBROKE PINES, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VAZQUEZ, RENATO L 7230 NW 77TH STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: Steven Gonzalez 3/29/07 (305) 994-7605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #