## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P98000031311**

1. Entity Name FRANCISCO AND SONS, INC.



FILED Jul 10, 2006 08:00 AN Secretary of State

Principal Place of Business

811 ABBEVILLE COURT KISSIMMEE, FL 34759 Mailing Address

811 ABBEVILLE COURT KISSIMMEE, FL 34759



DO NOT WRITE IN THIS SPACE

07032006 No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3515250

Applied For Not Applicable

5. Certificate of Status Desired

Ø,

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANTOS, FRANCISCO 811 ABBEVILLE COURT KISSIMMEE, FL 34759

## DO NOT WRITE IN THIS SPACE

	ions of registered agent.		office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept  ### U00000569079  ##################################
	Signature, typed or printed name of registered agent and title	If applicable. (NOTE: Registered Ag	ent signeture	required when reinstating)	Olitica appete att 1904 is
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	Election Campaign Financir     Trust Fund Contribution	° 🗆	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIREC	CTORS	******		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANTOS, FRANCISCO 811 ABBEVILLE COURT KISSIMMEE, FL 34759				
TITLE NAME STREET ADDRESS GITY-ST-ZIP	VP SANTOS, ELVIA M 811 ABBEVILLE COURT KISSIMMEE, FL 34759				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME		,			

12. I hereby certify that the information supplied with this filling 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:** 

STREET ADDRESS City-St-Zip

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCISCO SANTOS

President 7/3/0

Daytime Phone #