

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 25, 2004 8:00 am**  
**Secretary of State**

07-26-2004 90007 025 \*\*\*150.00  
08-25-2004 90003 040 \*\*\*400.00

**DOCUMENT # P98000072887**

1. Entity Name  
**P & R INDUSTRY, INC.**



Principal Place of Business

**3294 N.W. 41ST ST.  
MIAMI, FL 33142**

Mailing Address

**3294 N.W. 41ST ST.  
MIAMI, FL 33142**

**DO NOT WRITE IN THIS SPACE**



07122004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0302095**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**RAMIREZ, PEDRO  
3620 N.W. 4TH ST.  
MIAMI, FL 33125**

**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 \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>RAMIREZ, PEDRO</b>
STREET ADDRESS	<b>3620 N.W. 4TH ST.</b>
CITY-ST-ZIP	<b>MIAMI, FL 33125</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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(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: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**07/13/2004**

Day

Daytime Phone #



ATTACHMENT  
524069811

FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

July 28, 2004

**P & R INDUSTRY, INC.**  
3294 N.W. 41ST ST.  
MIAMI, FL 33142

Subject: **P & R INDUSTRY, INC.**

Reference Number: **P98000072887**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RG  
ANNUAL REPORTS SECTION