

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 14, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000075056

1. Entity Name
FRIDA INVESTMENTS INC.



Principal Place of Business

881 OCEAN DRIVE
#19-G
KEY BISCAYNE, FL 33149

Mailing Address

2550 NW 72 AVENUE
STE 216
MIAMI, FL 33122

DO NOT WRITE IN THIS SPACE



01172007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0869265

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LANCASTER, CPA, KENNETH M
50 WEST MASHTA DRIVE
#6
KEY BISCAYNE, FL 33149

**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 renewing)

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	PD
NAME	BUENO, MARIA GLORIA
STREET ADDRESS	210 SEAVIEW DRIVE # 612
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	TD
NAME	HERRERA, JORGE
STREET ADDRESS	210 SEAVIEW DRIVE # 612
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	SD
NAME	HERRERA, JORGE
STREET ADDRESS	210 SEAVIEW DRIVE # 612
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	D
NAME	HERRERA, EDUARDO
STREET ADDRESS	210 SEAVIEW DRIVE # 612
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000635321
02/23/07-80009-022 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/07

Date

305-318-4407

Daytime Phone #