

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90040 039 ***150.00

DOCUMENT # P98000083891

1. Entity Name
CSA MARKETING INC.



Principal Place of Business

**1566 NW 108 AVE
MIAMI, FL 33172**

Mailing Address

**1566 NW 108 AVE
MIAMI, FL 33172**

44014312

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02172004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-0534282

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FUSTE, JORGE L
9800 SW 119 ST
MIAMI, FL 33176**

7. Name and Address of New Registered Agent

Name

Fuste, Jorge L.

Street Address (P.O. Box Number is Not Acceptable)

1566 NW 108 Avenue

City

Miami

FL

Zip Code

33172

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

2/26/04

**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

TITLE **VD** ☐ Delete
NAME **MESTRIL, FERNANDO**
STREET ADDRESS **9271 S.W. 76TH ST.**
CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **PD** ☐ Delete
NAME **MESTRIL, MARTHA**
STREET ADDRESS **9271 S.W. 76TH ST.**
CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **VD** ☐ Delete
NAME **FUSTE, NANNETTE**
STREET ADDRESS **8600 SW 42 STREET**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE **VD** ☐ Delete
NAME **FUSTE, JORGE L**
STREET ADDRESS **9800 SW 119 ST**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **VD** ☐ Delete
NAME **FUSTE, MARIETTA**
STREET ADDRESS **8630 SW 42 STREET**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VD** ☒ Change ☐ Addition
NAME **Mestril, Fernando**
STREET ADDRESS **1566 NW 108 Avenue**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **PD** ☒ Change ☐ Addition
NAME **Mestril, Martha**
STREET ADDRESS **1566 NW 108 Avenue**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **VD** ☒ Change ☐ Addition
NAME **Fuste, Nannette**
STREET ADDRESS **1566 NW 108 Avenue**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **VD** ☒ Change ☐ Addition
NAME **Fuste, Jorge L.**
STREET ADDRESS **1566 NW 108 Avenue**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **VD** ☒ Change ☐ Addition
NAME **Fuste, Marietta**
STREET ADDRESS **1566 NW 108 Avenue**
CITY-ST-ZIP **Miami, FL 33172**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/04

Date

305-661-8828

Daytime Phone #