2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # P99000092385 Apr 10, 2007 08:00 AN Secretary of State 1. Entity Namo FRANCISCO R. VANEGAS & ASSOCIATES, INC. Principal Place of Business Mailing Address . 12988 S.W. 251ST STREET 12988 S.W. 251ST STREET **MIAMI FL 33032** MIAMI FL 33032 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0955633 Not Applicable Ζıp Country Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo VANEGAS, FRANCISCO R Street Address (P.O. Box Number is Not Acceptable) 12988 S.W. 251ST STREET MIAMI FL 33032 City Zip Code 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 agen. arre of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS Change ☐ Addition THE Detete TITLE VANEGAS, FRANCISCO R NAME NAME U00000698863 12988 S.W. 251ST ST. STREET ADDRESS STREET ADDRESS 04/19/07-80019-018 150.00 MIAMI FL 33032 CITY-ST-7IP CHY-ST-7IP VPD ☐ Change ___ Addition IIII. Delete THE VANEGAS, BALTAZARA NAME NAMI 12988 S.W. 251ST STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33032 CHY-SI-ZIP CHY-SI-7IP TD ma ☐ Delete TRUE ☐ Change Addition NAME VANEGAS, FREDDY NAME 12988 S.W. 251ST STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33032 CHY-ST ZIP CHY-S1-7IP SD TITLE ☐ Delete ☐ Change ☐ Addition THE VANEGAS, FRANCISCO R JR. NAMI NAME 12988 S.W. 251ST STREET STREET ADDRESS STRLET ADDRESS MIAMI FL 33032 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition 11111 NAM NAME STREET ADDRESS STREET ADDRESS CITY - ST - 71P CHY-ST-ZIP IIII: HILE Change [] Addition □ Delete NAME NAME STREET ADDRESS STREET ADORESS C11Y - ST - ZIP CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath, that I am an efficer or director of the corporation or the receiver or true to 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 attack ment and dress, with all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #