

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2006 8:00 am
Secretary of State

01-24-2006 90031 049 ***150.00

DOCUMENT # S91408

1. Entity Name
REIFFSTECK CORPORATION



Principal Place of Business

**245 SE 1ST STREET
SUITE 430
MIAMI, FL 33131**

Mailing Address

**245 SE 1ST STREET
SUITE 430
MIAMI, FL 33131**

66004268



02232006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0293995

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MATAKLET, PATRICE
12801 SW 68TH AVE
MIAMI, FL 33156**

**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 \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DVS
REIFFSTECK, MICHELE M.L.
12801 SW 68TH STREET
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PT
MATAILLET, PATRICE
12801 SW 68TH STREET
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**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

2/25/6
Date

305 969 9500
Daytime Phone #



ATTACHMENT

66004268

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2006

REIFFSTECK CORPORATION
245 SE 1ST STREET
SUITE 430
MIAMI, FL 33131

Subject: **REIFFSTECK CORPORATION**

Reference Number:

S91408

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 annual report/uniform business report must be signed by an officer or director of the corporation.

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.

/JE

ANNUAL REPORTS SECTION