

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # V28553

Entity Name
FILE NETWORK CORPORATION



Principal Place of Business

862 NW 34 ST
MIAMI, FL 33122 US

Mailing Address

7362 NW 34 ST., STE A
MIAMI, FL 33122 US

DO NOT WRITE IN THIS SPACE



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0326113

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

URTIAGA, CANDIDO, JR
862 NW 34 ST., STE A
MIAMI, FL 33122

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IN THIS SPACE**

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 (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**

1100000396801
01/30/06-80015-025 150.00

OFFICERS AND DIRECTORS

NAME	PD
ADDRESS	URTIAGA, CANDIDO, JR
ST-ZIP	8561 SW 1667 STREET
	PALMETTO BAY, FL 33157
NAME	STD
ADDRESS	URTIAGA, TERESA
ST-ZIP	8561 SW 167 STREET
	PALMETTO BAY, FL 33157
NAME	
ADDRESS	
ST-ZIP	
NAME	
ADDRESS	
ST-ZIP	
NAME	
ADDRESS	
ST-ZIP	

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IN THIS SPACE**

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

Jan 17, 2006

305 468-1733

Date

Daytime Phone #