2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S22747

1. Entity Name CONDAL IMPORTS, INC.



FILED Feb 25, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

531 DUPONT STREET BRONX, NY 10474

CITY-ST-ZIP

SIGNATURE

531 DUPONT STREET BRONX, NY 10474



DO NOT WRITE IN THIS SPACE

02042008 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
13-2820122		Not Applicable
5. Certificate of Status Desired		5 Additional equired

6. Name and Address of Current Registered Agent

PEREZ, DAVID 400 KINGS POINT DRIVE APT 211 SUNNY ISLES BEACH, FL 33160

DO NOT WRITE IN THIS SPACE

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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) OATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERNANDEZ, CARMEN 531 DUPONT STREET BRONX, NY 10474				,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FERNANDEZ, NESTOR 531 DUPONT STREET BRONX, NY 10474				U00000837539 03/04/08-80061-019 150,00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME							

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.

NESTOR FERNANDEZ/SECRETARY & TREASURER 02/13/08 589-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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