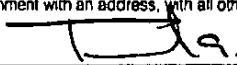


FILED
Jun 07, 2007 8:00 am
Secretary of State

05-15-2007 90006 047 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000019992		
1. Entity Name TERESITA GROUP HOMES, INC.		
Principal Place of Business 10882 SW 69 DRIVE MIAMI, FL 33173		Mailing Address 10882 SW 69 DRIVE MIAMI, FL 33173
2. Principal Place of Business - No P.O. Box # 10882 SW 69 DR		3. Mailing Address 10882 SW
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State Miami Florida		City & State Miami Florida
Zip 33173		Zip 33173
Country		Country
4. FEI Number 20-4263728		Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ECHEVARRIA, TERESITA 10882 SW 69 DRIVE MIAMI, FL 33173		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 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 \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST ECHEVARRIA, TERESITA 10882 SW 69 DRIVE MIAMI, FL 33173 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition
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: 		5/11/07 (305) 5980919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



Division of Corporations

Annual Report

66018269

Annual Report Help

Document Number

P06000019992 -

Business Entity Name

TERESITA GROUP HOMES, INC.

FEI Number

20-426372

FEI Number Status

Listed Above

Applied For

Not Applicable

Certificate of Status Desired

Yes

No

\$8.75 each

Election Campaign Financing Trust Fund Contribution

Yes

No

Principal Place of Business

Address

10882 SW 69 DRIVE

Suite, Apt. #, etc.

City, State

MIAMI

, FL

Zip Code & Country

33173

Mailing Address

Address

10882 SW 69 DRIVE

Suite, Apt. #, etc.

City, State

MIAMI

, FL

Zip Code & Country

33173

Name and Address of Registered Agent

Name (Last, First, Middle, Title)

ECHEVARRIA

TERESITA

- OR -

Business to serve as RA

Address (PO Box is not acceptable)

10882 SW 69 DRIVE

Suite, Apt. #, etc.

City, State

MIAMI

, FL

Zip Code & Country

33173

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

own RA.

66018269

#P06000019992

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title PST
Name (Last, First, Middle, Title) ECHEVARRIA , TERESITA

- OR -

Entity Name to serve as
Officer/Director

Street Address 10882 SW 69 DRIVE
City, State MIAMI , FL
Zip Code & Country 33173

Title
Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)

- OR -

ATTACHMENT

Entity Name to serve as
Officer/Director

66018269

Street Address

P06000019992

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

RST

Officer/Director Signature

[Signature]

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue Reset

Start Over