

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000083961

**Entity Name:** ESTIME & IRVIN ASSOCIATES, INC.

**FILED  
Apr 30, 2015  
Secretary of State  
CC9970317089**

**Current Principal Place of Business:**

111 NE 1 STREET  
SUITE 324  
MIAMI, FL 33132

**Current Mailing Address:**

1125 NE 125 STREET  
SUITE 103  
NORTH MIAMI, FL 33161 US

**FEI Number:** 45-3544165

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ESTIME-IRVIN, MARY C  
111 NE 1 STREET  
SUITE 324  
MIAMI, FL 33132 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            ESTIME-IRVIN, MARY C  
Address        111 NE 1 STREET  
City-State-Zip: MIAMI FL 33132

Title            VP  
Name            ESTIME, SIMONNE B  
Address        111 NE 1 STREET  
City-State-Zip: MIAMI FL 33132

Title            TRES  
Name            ESTIME-IRVIN, MARY C  
Address        111 NE 1 STREET  
City-State-Zip: MIAMI FL 33132

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARY ESTIME-IRVIN

**PRES**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date