

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000067901

**Entity Name:** CONSOLIDATED MANAGEMENT RESOURCES, INC

**Current Principal Place of Business:**

719 NW 29 STREET  
MIAMI, FL 33127

**FILED**  
**May 01, 2013**  
**Secretary of State**  
**CC6943245050**

**Current Mailing Address:**

719 NW 29 STREET  
MIAMI, FL 33127

**FEI Number: 90-0878070**

**Certificate of Status Desired: Yes**

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

CARBON, AUGUSTINE  
719 NW 29 STREET  
MIAMI, FL 33127 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            P  
Name            CARBON, AGUSTINE  
Address        719 NW 29 STREET  
City-State-Zip: MIAMI FL 33127

*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: CARBON AGUSTINE**

**P**

**05/01/2013**

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

\_\_\_\_\_  
Date