

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 433976

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** THREE R'S MANAGEMENT CORP.

**Current Principal Place of Business:**

695 EAST 10TH AVE  
HIALEAH, FL 33010

**New Principal Place of Business:**

705 EAST 10TH AVE  
HIALEAH, FL 33010

**Current Mailing Address:**

695 EAST 10TH AVE  
HIALEAH, FL 33010

**New Mailing Address:**

705 EAST 10TH AVE  
HIALEAH, FL 33010

**FEI Number:** 59-1508332

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALITA ROSENFELD  
695 EAST 10TH AVE  
HIALEAH, FL 33010 US

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

ALITA ROSENFELD  
705 EAST 10TH AVE  
HIALEAH, FL 33010 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:

04/01/2011

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ROSENFELD, ALITA  
Address: 695 E 10TH AVE  
City-St-Zip: HIALEAH, FL 33010

Title: SCTY  
Name: ROSENFELD, JASON  
Address: 695 E 10TH AVE  
City-St-Zip: HIALEAH, FL 33010

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: ALITA ROSENFELD

PD

04/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date