

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L39012

Entity Name
TESSI GARCIA & ASSOCIATES, INC.



Principal Place of Business

**888 BRICKEN KEY DR
412
MIAMI, FL 33131 US**

Mailing Address

**888 BRICKEN KEY DR
412
MIAMI, FL 33131 US**



01062006 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-0179181

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**GARCIA, TESSI
888 BRICKEN KEY DR
APT 412
MIAMI, FL 33131**

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IN THIS SPACE**

I, 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)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**000000395123
01/30/06-80079-010 150.00**

OFFICERS AND DIRECTORS

**PST
GARCIA, TESSI MISS
888 BRICKELL KEY DR APT 412
MIAMI, FL 33131**

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IN THIS SPACE**

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 807, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/9/06 305 358-6008

Date

Daytime Phone #