

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # M54643

1. Entity Name

IRON MANOR PROPERTIES, INC.



FILED
Feb 11, 2008 08:00 AM
Secretary of State



Principal Place of Business

986 NE 126 ST
MIAMI FL 33161

Mailing Address

986 NE 126 ST
MIAMI FL 33161

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2826447

Applied For
Not Applicable

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

1st MOORE CR2E034 (10/07)

6. Name and Address of Current Registered Agent

BERTOT, LILLIAN
2398 S.W. 22ND AVENUE
MIAMI FL 33145

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 (if applicable) The principal

2008 Registered Agent Signature required when changing agent

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	BERTOT, EDUARDO B.	
STREET ADDRESS	1620 N.E. 108TH ST.	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VP	☐ Delete
NAME	BERTOT, LILLIAN D.	
STREET ADDRESS	2398 SW 22 AVE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	S	☐ Delete
NAME	BERTOT, LILIA H.	
STREET ADDRESS	2398 SW 22 AVE	
CITY-STATE-ZIP	MIAMI FL 33145	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U00000824203
02/20/08-80068-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

EDUARDO BERTOT 2/7/08 3058933542
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filing Number