

04/26/2006 15:12 4072910255

ACCOUNT

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am³
Secretary of State

05-01-2006 90335 042 ***150.00

DOCUMENT # P02000015336

1. Entity Name
FLORIDA CENTRAL FINANCIAL SERVICES, INC.



Principal Place of Business
2500 CURRY FORD ROAD
SUITE 7
ORLANDO, FL 32806

Mailing Address
2500 CURRY FORD ROAD
SUITE 7
ORLANDO, FL 32806

40072483



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04282006

Chg-P

CR2E034 (11/05)

4. FEI Number
75-3004139

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RODRIGUEZ, MARTIN JR
2908 DAY BREAK DRIVE
ORLANDO, FL 32825

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

10. OFFICERS AND DIRECTORS

TITLE	O	☐ Delete
NAME	RODRIGUEZ, ROSA M	
STREET ADDRESS	2500 CURRY FORD ROAD	
CITY- ST- ZIP	ORLANDO, FL 32806	
TITLE	O	☐ Delete
NAME	RODRIGUEZ, MARTIN SR	
STREET ADDRESS	2500 CURRY FORD ROAD	
CITY- ST- ZIP	ORLANDO, FL 32806	
TITLE	O	☐ Delete
NAME	RODRIGUEZ, MARTIN JR	
STREET ADDRESS	2500 CURRY FORD ROAD	
CITY- ST- ZIP	ORLANDO, FL 32806	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

12. 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 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:

Martin Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/06
Date

Daytime Phone #