

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000044399

1. Entity Name
BIRD ROAD STATION CORP.



Principal Place of Business

**7625 SW 40TH ST
MIAMI, FL 33155**

Mailing Address

**7625 SW 40TH ST
MIAMI, FL 33155**



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 46-0478698	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ATIENZA, EDUARDO
9240 SW 64 ST
MIAMI, FL 33173**

**DO NOT WRITE
IN THIS SPACE**

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	D
NAME	ATIENZA, EDUARDO
STREET ADDRESS	9240 SW 64 ST
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	D
NAME	SOLARES, JOSE J
STREET ADDRESS	9240 SW 64 ST
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	D
NAME	MORENO, ANTONIO
STREET ADDRESS	10431 SW 40 TERRACE
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	FOLGUEIRA, BASILIO J
STREET ADDRESS	11391 SW 64 ST
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	D
NAME	FRESNEDA, OTTO
STREET ADDRESS	9145 SW 72 AVE APT 3
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000452095
03/11/06-R0013-004 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

OTTO FRESNEDA **OTTO FRESNEDA** 2/25/06 305-264-7891