

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90287 011 ***150.00

DOCUMENT # P02000071615

1. Entity Name

ESTRADA MANAGEMENT CORP.



Principal Place of Business

**25594 S.W. 122ND PLACE
HOMESTEAD, FL 33032**

Mailing Address

**25594 S.W. 122ND PLACE
HOMESTEAD, FL 33032**

2. Principal Place of Business

3671 N.W. 100 Street

Suite, Apt. #, etc.

3. Mailing Address

25513 Uresti Road

Suite, Apt. #, etc.



04272006

Chg-P

CR2E034 (11/05)

City & State

Miami Florida

City & State

Edinburg, Texas

4. FEI Number

50-0004054

Applied For

Not Applicable

Zip

33147

Country

U.S.A.

Zip

78541

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ESTRADA, JESUS JR
25594 S.W. 122ND PLACE
HOMESTEAD, FL 33032**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3671 N.W. 100 Street

City

Miami

FL

Zip Code

33147

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
ESTRADA, JESUS
25594 S.W. 122ND PLACE
HOMESTEAD, FL 33032** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**3671 N.W. 100 Street
Miami FL 33147** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
AIXA ESTRADA
3671 N.W. 100 Street
Miami FL 33147** ☐ Change ☒ Addition

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

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

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

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

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:

Jesus Estrada

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #