


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2006 8:00 am
Secretary of State

08-22-2006 90030 030 ***158.75

DOCUMENT # P03000095735 1. Entity Name E & M MANAGEMENT SERVICES, CORP	
--	---

Principal Place of Business 13727 SW 152 ST #233 MIAMI, FL 33177	Mailing Address 13727 SW 152 ST # 233 MIAMI, FL 33177
--	---

00020971



08142006 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1185040	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ESLAIT, SERGIO J DP 947 SW 155 CT MIAMI, FL 33194

**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, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE **8/15/2006**
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
Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MARTINEZ, RICARDO R 14833 SW 176 ter Miami FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DU Sandra Martinez 14833 SW 176 ter Miami FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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:  **RICARDO R MARTINEZ**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/06
Date

Daytime Phone #