

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088012

FILED  
Apr 15, 2012  
Secretary of State

**Entity Name:** TAVARES MANAGEMENT ENTERPRISES, INC.

**Current Principal Place of Business:**

310 CARRIAGE OAK PLACE  
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

310 CARRIAGE OAK PLACE  
SEFFNER, FL 33584

**New Mailing Address:**

**FEI Number:** 04-3677463

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAVARES, CARLOS M  
310 CARRIAGE OAK PLACE  
SEFFNER, FL 33584 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TAVARES, CARLOS M  
Address: 310 CARRIAGE OAK PLACE  
City-St-Zip: SEFFNER, FL 33584

Title: VP  
Name: TAVARES, CARLOS M  
Address: 310 CARRIAGE OAK PLACE  
City-St-Zip: SEFFNER, FL 33584

Title: T  
Name: TAVARES, CARLOS M  
Address: 310 CARRIAGE OAK PLACE  
City-St-Zip: SEFFNER, FL 33584

Title: S  
Name: TAVARES, CARLOS M  
Address: 310 CARRIAGE OAK PLACE  
City-St-Zip: SEFFNER, FL 30078

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS M TAVARES

PRES

04/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date