2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 8:00 am Secretary of State

Date

Daytime Phone #

DOCUMENT # P05000140416 1. Entity Name ESTEVEZ FINANCIAL SERVICES, INC.							03-29-2006	901160	i25 ***15i	0.00
Principal Place of Business 6851 WEST 36 AVENUE APT 101 HIALEAH, FL 33018			Mailing Address 6851 WEST 36 AVENUE APT 101 HIALEAH, FL 33018			66012180				
2. Principal P	lace of Busin	ess	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03142006	Chg-P	CR2E0	34 (11/05)	
City & State			City & State			4. FELNumb	36474	44		oplied For ot Applicable
Ζίρ Country		Zìp Coun		try	5. Certificate	of Status Desired		\$8.75 Add	litional	
6. Name and Address of Current F			Registered Agent	7. Name and Address of New Registered Agent						
ESTEVEZ, ALVARO 6851 WEST 36 AVENUE 101 HIALEAH, FL 33018					Street Address City	s (P.O. Box Numb	er is Not Acceptable	») FL	Zip Code	ө
	named entitions of regis	ered agent.	r the ourpose of changing its	١	ed office or regist		th, in the State of Flo		<u> </u>	and accept
After Ma		FEE IS \$150.00 6 Fee will be \$550.		tribution.	· _ •	5.00 May Be dded to Fees				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6851 WE	OFFICERS AND C, ALVARO ST AVENUE APT 101 , FL 33018	DIRECTORS Delete			ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTOR:	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6851 WE	, FRANCIA ST 36 AVENUE APT 10 , FL 33018	☐ Delete		- I				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CHTY-ST-ZIP			☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1				☐ Change	☐ Addition
12. I hereby indicated of the corchanged	certify that the on this reporporation or to or on an att	e information supplied with rt or supplemental report in the receiver or trustee emp achment with an address	this filing does not qualify f rule and accurate and that wered to execute this repor with all other like empowered	or the exi my signa t as requi	emptions contain ture shall have th ired by Chapter 6	ned in Chapter 119 ne same legal effer 607, Florida Statute	9, Florida Statutes. I ct as if made under o es; and that my nam	further cer oath; that I e appears i	tify that the it am an officer in Block 10 o	nformation or director r Block 11 if

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

3/29/2006-90116-025-\$150.00-\$150.00

2006 FOR PROFIT CORPORATION 66012180 ANNUAL REPORT DOCUMENT # P05000140416 1. Grity Name ESTEVEZ FINANCIAL SERVICES, INC. Principal Place of Business. Mailing Address 6851 WEST 36 AVENUE APT 101 6851 WEST 36 AVENUE APT 101 HIALEAH, FL 33018 HALEAH, FL 33018 2. Principal Place of Business 3. Making Address Suite, Apt. 4, etc. Suite, Apt. I., etc. 03142008 CRZE034 (11/05) City & State City & State 4. FEI Number Applied For 20-3647444 Not Applicable A Country Zφ Country \$8.75 Additor 8. Certificate of Status Desired 4. Hums and Address of Current Registered Agent 7. Name and Address of New Registered Age ESTEVEZ, ALVARO 6851 WEST 36 AVENUE Street Address (P.O. Box Nurtiber is Not Acceptable) HIALEAH, FL 33018 FL Zp Cook Alvaro Estruez 206 FILE NOWID FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Blackin Compaign Promoting Trust Pund Contribution. \$5.00 May Be Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS DI 11 TOLE mu Cargo Addition ESTEVEZ, ALVARO CHET ACCES 6881 WEST AVENUE APT 101 DEI AUGS HIALEAH, FL 33018 QTY-\$3-2P CTT - SI-29 mı Octob MLE ESTEVEZ, FRANCIA 6851 WEST 38 AVENUE APT 101 STREET ADDRESS CTTY-53-20 HIALEAH, FL 33018 C174 - 51 - 229 mi WILE C 0----☐ Addition STREET ACCURES ENGIN ADDRESS ជា។-ឆ្ព-ភ GT7-51-20° C) Debid TOL: Comp CAddition EDIET ADDRESS STREET ACCESSES OTT-53-29 **型・記・記** TILL! Carros C Addition STREET ALEM STREET ACCURAGE CD7 - ST - 299 CITY-\$3-20 ML O Destey TILLE Champs Addition **MARK** STREET ADDRESS SHIPT CHESS GTT-SI-28* G77-51-20

12. I hereby certify that the information supplied with this Sling does not quality for the examptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and excurate and that my signature shall have the same legal effect as it made under cells; that I am an office or director of the corporation or the modeles or trustee empowered to research this respect as required by Chapter 607, Floride Statutes; and that my manné appears in Block 10 or Block 11 if chapter 607 on an attachment with an extress, with all other like empowered.