

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096264

FILED  
Apr 26, 2012  
Secretary of State

Entity Name: CRUZ MANAGEMENT, INC.

**Current Principal Place of Business:**

6965 GRANADA BLVD  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

6965 GRANADA BLVD  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 11-3823421

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MULLER, CHARLES E II  
7385 GALLOWAY ROAD SUITE 200  
MIAMI, FL 33173 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: D  
Name: CRUZ, LUIS  
Address: 6965 GRANADA BLVD  
City-St-Zip: CORAL GABLES, FL 33146

Title: D  
Name: CRUZ, JORGE  
Address: 284 LAS BRISAS COURT  
City-St-Zip: CORAL GABLES, FL 33143

Title: D  
Name: ARRIZABALAGA, MARGARITA  
Address: 7110 ROBLES STREET  
City-St-Zip: CORAL GABLES, FL 33143

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: LUIS CRUZ

D

04/26/2012

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

\_\_\_\_\_  
Date