

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000056312

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** ALMANZAR TAX, ACCOUNTING & CONSULTING CORP.

**Current Principal Place of Business:**

945 SW 87 AVE  
UNIT A  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

945 SW 87 AVE  
UNIT A  
MIAMI, FL 33174

**New Mailing Address:**

**FEI Number:** 27-1107127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TEJADA, FLABIA  
945 SW 87 AVE  
UNIT A  
MIAMI, FL 33174 US

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

ALMANZAR, ELEUTERIO  
945 SW 87 AVE  
UNIT A  
MIAMI, FL 33174 US

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:** ELEUTERIO ALMANZAR

03/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ALMANZAR, ELEUTERIO  
**Address:** 945 SW 87 AVE UNIT A  
**City-St-Zip:** MIAMI, FL 33174

**Title:** VP  
**Name:** ESTEVEZ, DOLIBET  
**Address:** 945 SW 87 AVE UNIT A  
**City-St-Zip:** MIAMI, FL 33174

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:** ELEUTERIO ALMANZAR

PRES

03/12/2012

Electronic Signature of Signing Officer or Director

Date