

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000072524

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** HEADQUARTER ORLANDO MANAGEMENT, INC.

**Current Principal Place of Business:**

17700 STATE ROAD 50  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

5895 N.W. 167 STREET  
HIALEAH, FL 33015 US

**New Mailing Address:**

**FEI Number:** 27-3387126

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SERRA, JUDY L. FARCUS  
5895 N.W. 167 STREET  
HIALEAH, FL 33015 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:** DP  
**Name:** ESTEVE, JERONIMO M  
**Address:** 5895 N.W. 167 STREET  
**City-St-Zip:** HIALEAH, FL 33015 US

**Title:** DS  
**Name:** ESTEVE, YAZMIN B  
**Address:** 5895 N.W. 167 STREET  
**City-St-Zip:** HIALEAH, FL 33015 US

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:** JERONIMO M. ESTEVE

DP

04/20/2011

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

\_\_\_\_\_  
Date