

**2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P11000045703

**FILED  
Mar 08, 2012  
Secretary of State**

**Entity Name:** ESPADA MODEL MANAGEMENT INC

**Current Principal Place of Business:**

119 N 11TH STREET STE 300A  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

119 N 11TH STREET STE 300A  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 45-2303133      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SPADA, ANDREW IV  
1638 LEDGESTONE DRIVE  
BRANDON, FL 33511 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: PD  
Name: SPADA, ANDREW IV  
Address: 1638 LEDGESTONE DRIVE  
City-St-Zip: BRANDON, FL 33511

Title: TR  
Name: HAIRE, BENJAMIN  
Address: 17909 CRAWLEY RD  
City-St-Zip: KEYSTONE, FL 33556

Title: SC  
Name: ELBANNA, ALEX  
Address: 4522 WEST BEACHWAY DR.  
City-St-Zip: TAMPA, FL 33609

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: PRESIDENT/ANDREW SPADA IV

PD

03/08/2012

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

\_\_\_\_\_ Date