2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

ANNUAL REPORT					
DOCUMENT # P920 1. Entity Name TESMER PROPERTIES, IN					
Principal Place of Business	Mailing Address				
10264 SW 26 TERRACE MIAMI, FL 33165	10264 SW 26 TERRACE MIAMI, FL 33165				

	63 26 B 18 2	MAN JARAH MINISTER JAN
1		
	13 18 8 BR	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01122007 No Chg-P CR2E0

CR2E034 (11/05)

4. FEI Number 65-0375347

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

SUAREZ, MANUEL H 10264 SW 26 TERRACE MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

		III TIIIO OTAOL					
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or pointed name of registered agent and title if applicable (NOTE: Registered Agent)				required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution	sing 🔲	\$5.00 May Be Added to Fees	U00000594420 01/22/07-80070-020 150.00		
10,	OFFICERS AND DIREC	TORS					
NAME STREET ADDRESS CITY-ST-ZIP	DP SUAREZ. MANUEL H 10264 SW 26 TERRACE MIAMI, FL 33165		DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TAPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytime Phone *