

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90237 050 ***150.00

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1. Entity Name
MENDIETA FELSER ASSOCIATES, INC.



Principal Place of Business

6231 SW 127TH COURT
SUITE 3203
MIAMI, FL 33183 US

Mailing Address

6231 SW 127TH COURT
MIAMI, FL 33183 US

DO NOT WRITE IN THIS SPACE



01192006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0394395	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FELSER, INA
10275 COLLINS AVE
#1430
BAL HARBOUR, FL 33154

new Address
6301 Collins Ave.
#1608
MIAMI Beach, FL
33141

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IN THIS SPACE**

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FELSER, INA
STREET ADDRESS	6231 SW 127TH COURT
CITY - ST - ZIP	MIAMI, FL 33183

TITLE	D
NAME	MENDIETA, CONSTANTINO
STREET ADDRESS	6231 SW 127TH COURT
CITY - ST - ZIP	MIAMI, FL 33183

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
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CITY - ST - ZIP	

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CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 accurate 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CONSTANTINO A. MENDIETA.
Vice-pres.