

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000021000

1. Entity Name
ESSAY MANAGEMENT, INC.



Principal Place of Business
801 N.E. 167TH ST.
SUITE 307
N. MIAMI BEACH, FL 33162 US

Mailing Address
801 N.E. 167TH ST.
SUITE 307
N. MIAMI BEACH, FL 33162 US



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0476628** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N
2875 N.E. 191ST ST.
SUITE 404
N. MIAMI BEACH, FL 33180

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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, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANGEL, STANLEY 801 N.E. 167TH ST., STE 307 N. MIAMI BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ANGEL, ERIC 801 N.E. 167TH ST., STE 307 N. MIAMI BEACH, FL
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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 an other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIC ANGEL

1/31/08
 Date

(305) 652-2777
 Daytime Phone #