

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000043221

FILED
Aug 02, 2007
Secretary of State

Entity Name: ECHEMENDIA & SONS, CORP.

Current Principal Place of Business:

3400 NW 67TH ST
MIAMI, FL 33147

New Principal Place of Business:

2600 S. DOUGLAS RD PH-6
CORAL GABLES, FL 33134

Current Mailing Address:

3400 NW 67TH ST
MIAMI, FL 33147

New Mailing Address:

2600 S. DOUGLAS RD PH-6
CORAL GABLES, FL 33134

FEI Number: 65-0760437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICHEMENDIA, ALBERICO
3400 NW 67TH ST
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

PADIAL, JOSE I
2600 S. DOUGLAS RD. PH-6
CORAL GABLES, FL 33134 US

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: JOSE PADIAL

08/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: EICHEMENDIA, ALBERICO
Address: 3400 NW 67TH ST
City-St-Zip: MIAMI, FL 33147

Title: DV () Delete
Name: EICHEMENDIA, MARISEL
Address: 3400 NW 67TH ST
City-St-Zip: MIAMI, FL 33147

Title: DS () Delete
Name: EICHEMENDIA, MARISEL
Address: 3400 NW 67TH ST
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: EICHEMENDIA, ALBERICO
Address: 2600 S. DOUGLAS RD PH-6
City-St-Zip: CORAL GABLES, FL 33134

Title: DV (X) Change () Addition
Name: EICHEMENDIA, MARISEL
Address: 2600 S. DOUGLAS RD PH-6
City-St-Zip: CORAL GABLES, FL 33134

Title: DS (X) Change () Addition
Name: EICHEMENDIA, MARISEL
Address: 2600 S. DOUGLAS RD PH-6
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ALBERICO EICHEMENDIA

DP

08/02/2007

Electronic Signature of Signing Officer or Director

Date