

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000043221

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** ECHEMENDIA & SONS, CORP.

**Current Principal Place of Business:**

3039 WEST 2 AVENUE  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

3039 WEST 2 AVENUE  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 65-0760437

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PADIAL, JOSE I  
2600 S. DOUGLAS ROAD  
PENTHOUSE 6  
CORAL GABLES, FL 33134 US

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

PADIAL, JOSE I PA  
2600 S. DOUGLAS ROAD  
PENTHOUSE 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 I PADIAL

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ECHEMENDIA, ALBERICO  
Address: 3039 WEST 2 AVENUE  
City-St-Zip: HIALEAH, FL 33012

Title: DVPS  
Name: ECHEMENDIA, MARISEL  
Address: 3039 WEST 2 AVENUE  
City-St-Zip: HIALEAH, FL 33012

Title: DVP  
Name: ECHEMENDIA, MARIO  
Address: 3039 WEST 2 AVENUE  
City-St-Zip: HIALEAH, FL 33012

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: ALBERICO ECHEMENDIA

DP

04/20/2011

Electronic Signature of Signing Officer or Director

Date