

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000148442

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC1916547916**

**Entity Name:** FRAXEDAS MANAGEMENT CORP.

**Current Principal Place of Business:**

7245 SW 130TH STREET  
PINECREST, FL 33156

**Current Mailing Address:**

7245 SW 130TH STREET  
PINECREST, FL 33156

**FEI Number:** 20-3758492

**Certificate of Status Desired:** No

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

FRAXEDAS, AYLIN  
7245 SW 130TH STREET  
PINECREST, FL 33156 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	D
Name	FRAXEDAS, ENRIQUE	Name	FRAXEDAS, AYLIN
Address	7245 SW 130TH STREET	Address	7245 SW 130TH STREET
City-State-Zip:	PINECREST FL 33156	City-State-Zip:	PINECREST FL 33156

*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:** ENRIQUE FRAXEDAS

**PRESIDENT**

**04/26/2013**

Electronic Signature of Signing Officer/Director Detail

Date