FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

(1)

SERGIO H. VALLEJO, P.A.

Address	

				,								
Principal Place of	Business		Mailing Add	dress								
1645 LAKELAND HILLS BLVD			1645 LAKELAND HILLS BLVD LAKELAND FL 33805									
LAKELAND FL	33805		LAKELAN	IU PL 33800								
	-							 Date Incorporated or Qualified 07/08/1976 	3a. D	ate of Last R 03/15/19	95	
2. Principal Place	e of Business		2a. Mailing	Address				4. FEI Number 59-1623611		↓	Applied For Not Applicable	
Suite, Apt. #,	etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired	ed S8.75 Additional Fee Required			
City & State			City & State					Election Campaign Financing Trust Fund Contribution	Added to Fees			
Zip Country 24 25			Zip Country 30					This corporation has liability for intangible tax under s 199.032, Flonda Statutes				
	9. Name and Addre	ess of Current R	egistered A	gent			.,,,,,	10. Name and Address of New	Register	ed Agent		
						81	Name					
VALLEJO, SERGIO H. 1645 LAKELAND HILLS BLVD							Street Add	ss (P.O. Box Number is Not Acceptable)				
	ID FL 33805					83						
						84	City			·L	ip Code	
or registered familiar with	d agent, or both, in the n, and accept the obliga	e State of Florida. ations of, Section	607.0505, F	e was authorize Iorida Statutes	ea by the c	orpx	312001-5-006	ration submits this statement for the pard of directors. I hereby accept the ap	urpase of pointment		d agent. I am	
	rynature, typed or printed name			'MC)	13.	Agran	(Signaline reg)	ADDITIONS/CHANGES TO OF			ORS IN 12	
12.	PD	OFFICERS AND [DELETE	1 1 1	TI F		ADDITIONS OF FIGURE		Change		
TITLE	VALLEJO, SERGI	IO H.	L		12 N/							
NAME	1645 LAKELAND						ADDRESS				Ì	
STREET ADDRESS	LAKELAND FL				140							
CITY-ST-ZIP TITLE				DELETE	2 1 1	_				Change	Addition	
1					2 2 N						 	
NAME OTHER ADDRESS							ADDRESS					
STREET ADDRESS							ST - ZIP				j	
CITY-S1-2 P TITLE				DELETE	3 1 1					Change	☐ Addition	
NAME			·		3 2 N	AME						
STREET ADDRESS					33 \$	TREE	1 ADDRESS				ļ	
CHY-ST-ZIP					3.4 C	(Y-\$	ST - ZIF					
TITLE				DELETE	4 1 7	ITLE				Change	: Addition	
NAME					4 2 N	AME						
STREET ADORESS					43S	THEF	T ADDRESS					
CITY-ST ZIP					440	(I Y - !	ST - ZIP		· · · · · · · · · · · · · · · · · · ·			
TITLE				DELETE	5 1 7	IILF				[] Change	Addition	
NAME					5 2 N	AME					ļ	
STREET ADORESS					538	TAEE	T ADDRESS					
CHTY-ST-ZIP					540	ITY -	ST - ZIP					
THILE				DELETE	6.1					Change	e 🔲 Addition	
NAME					621	AME						
STREET ACCIDESS					635	IREE	T ADDRESS					
CITY OF JID					640	ITY -	ST-ZIP					

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cart, 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 12 or Block 13 if changed, or or, an attachment with an address

SIGNATURE:

SIGNATURE AND TYPE

Daymon Prante #