FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000001475 (1)

ORLANDO FERNANDEZ SR., P.A.

	M. W. Add				
Principal Place of Business	Mailing Address		·		
2350 CORAL WAY SUITE 403	2350 CORAL WAY SUITE 403				
MIAMI FL 33145 MIAMI FL 33145			DO NOT WRITE IN THIS	SPACE	
			3. Date incorporated or Qualified 01/08/1993		
2. Principal Place of Business	2a. Mailing Address		4, FEI Number	Ι Δο	plied For
21	26		65-0379357		t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	
22	27		5. Certificate of Status Desired	Fee Re	pduired
City & State City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00	
Zip Country	28	Country	moor and commodition	Added t	
Zip Country 25	29 30	¬ ′	This corporation owes or has paid the corporate Personal Property Tax due June 30.		angibie] No
9, Name and Address of Current		<u>, </u>	10. Name and Address of New Registered		
FERNANDEZ, ORLANDO		81 Name			
2350 CORAL WAY		82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
SUITE 403					
MIAMI FL 33145		83			
		84 City	F!	85 Zip (Code
207.000	and CO7 4COR Florida Ctatudas	the shows named our		of changing its	c registered
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations.	and 607, 1506, Florida Statutes, If Florida. Such change was auth ions of, Section 607,0505, Florid	horized by the corpora la Statutes.	tion's board of directors. I hereby accept the ap	ppointment as	registered
SIGNATURE Signature, typed or printed name of registered agent	and this if applicable /NOTE: B	legistered Agent signature requ	ired when reinstaling) DATE		l
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	IS IN 12
титье ОР	☐ DELETE	1.1 TITLE		Change	Addition
NAME FERNANDEZ, ORLANDO		1.2 NAME			İ
STREET ADDRESS 2350 CORAL WAY SUITE 403		1.3 STREET ADDRESS			
CITY-ST-ZIP MIAMI FL	Documen	1.4 CITY-ST-ZIP		Change	Addition
I TITLE	☐ DELETE	2.1 TITLE		LT CHANGE	L AUGILION
NAME		22 NAME 23 STREET ADDRESS			
STREET ADDRESS		2.4 CITY-ST-ZIP			
CITY-ST-ZIP	DELETE	3.1 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CFTY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE		Change	☐ Addition
NAME		4.2 NAME			
STREET ADDRESS					ļ
CITY-ST-ZIP		4.3 STREET ADDRESS			
	T DELETE	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Channe	Addition
TITLE	DELETE .	4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE		Change	☐ Addition
	DELETE .	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change	☐ Addition

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

___ Addition

FILED

Apr 15 1998 8:00am

Secretary of State