

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 6:45

TALLAHASSEE, FLORIDA

800001486768
-05/12/95--01136--008
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000066005 (7)

1. Corporation Name

MARTIN, BATISTA & LOPEZ, P.A.

Principal Place of Business

1840 WEST 49TH STREET STE. 105
HALEAH FL 33012

Mailing Address

1840 WEST 49TH STREET STE. 105
HALEAH FL 33012

3. Date incorporated or Qualified

09/08/1994

3a. Date of Last Report

2. Principal Place of Business

21 255 ALHAMBRA CIR.

2a. Mailing Address

26

4. FEI Number

65-0528682

Applied For

Not Applicable

Suite, Apt. #, etc

22 420

Suite, Apt. #, etc

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

23 CORAL GABLES, FL

City & State

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

24 33134

Country

25 DADE

Zip

29

Country

30

8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

MARTIN, FELIX J ESQ.
1840 WEST 49TH STREET STE. 105
HALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name FELIX J. MARTIN, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable) 255 ALHAMBRA CIRCLE
83 SUITE 420
84 City CORAL GABLES FL 85 Zip Code 33134

11. Pursuant to the provisions of Sections 607.0248 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 607.053, Florida Statutes.

SIGNATURE

[Signature]

4-21-95

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LOPEZ, LAZARO J ESQ.
STREET ADDRESS	1840 WEST 49TH STREET STE. 105
CITY - ST - ZIP	HALEAH FL 33012
TITLE	D
NAME	MARTIN, FELIX J ESQ.
STREET ADDRESS	1840 WEST 49TH STREET STE. 105
CITY - ST - ZIP	HALEAH FL 33012
TITLE	D
NAME	BATISTA, RHADAMES C ESQ.
STREET ADDRESS	1840 WEST 49TH STREET STE. 105
CITY - ST - ZIP	HALEAH FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY - ST - ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY - ST - ZIP	

14. I 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 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.

SIGNATURE:

[Signature] LAZARO LOPEZ

4-21-95 (201) 446 001

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(13)

(Multiple Filings)