

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

FILED

Feb 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000097919 (9)

1. Corporation Name

ANTONIA CANERO, P.A.



Principal Place of Business

2906 DOUGLAS ROAD
SUITE 201
CORAL GABLES FL 33134

Mailing Address

2906 DOUGLAS ROAD
SUITE 201
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1997

2. Principal Place of Business

21 1200 Brickell Avenue

Suite, Apt. #, etc.

22 Suite 1250

23 City & State
Miami, Florida

24 Zip
33131

25 Country
U.S.A.

2a. Mailing Address

26 1200 Brickell Avenue

Suite, Apt. #, etc.

27 Suite 1250

28 City & State
Miami, Florida

29 Zip
33131

30 Country
U.S.A.

4. FEI Number

65-0796531

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~EDWARDS, DEBORAH M
2906 DOUGLAS ROAD
SUITE 201
CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent

81 Name Antonia Canero-Davies

82 Street Address (P.O. Box Number is Not Acceptable)

1200 Brickell Avenue

83 Suite 1250

84 City Miami

FL 85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~SFO~~ ☒ DELETE

NAME ~~CANERO, ANTONIA~~

STREET ADDRESS ~~2906 DOUGLAS RD. STE. 201~~

CITY-ST-ZIP ~~CORAL GABLES FL 33134~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☒ Change ☐ Addition

1.2 NAME

Canero, Antonia

1.3 STREET ADDRESS 1200 Brickell Ave, Suite 1250

1.4 CITY-ST-ZIP Miami, Florida 33131

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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.

SIGNATURE:

Antonia Canero 2/17/98 375529-9218

CR2E034 (10/97)