## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Apr 23, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # S13284 o fernandez, Jr., p.a.				~		- y - 0 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	
Principal Place 2350 CORAL MIAMI, FL 33	WAY STE.403	Mailing Address 2350 CORAL WAY STE.403 MIAMI, FL 33145		) 1 (1871/1870 (1870	11 <b>1111 - 21111 - 11113 - 11113</b>	<b>2</b>  1    2  3    6  2   1	(IP) Plui Biblipe; il ipei	
ם	O NOT WRITE	IN THIS SPA	CE	04202004 4. FE! Numbe 65-0230		CR2E034		
	6. Name and Address of Current Re	egistered Agent						
FERNANDEZ, ORLANDO, JR 2350 CORAL WAY, SUITE 403 MIAMI, FL 33145			DO NOT WRITE IN THIS SPACE					
8. The above the obligati	named entity submits this statement for the long of registered agent	ne purpose of changing its registere	ed office or register	ed agent, or both	n, in the State of Flo	rida I am fan	niliar with, and accept	
SIGNATUPE Signature typed or printed name of registered agent and nile if applicable (NOTE Registered Agent signature requi					d when reinstaling) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution			neing _ <b>\$5.</b>	00 May Be	U00000	0126108	227 450 66	
10.	OFFICERS AND DI	RECTORS	i		D47.C37.D4	<del>-00000-</del> (	<del>)22 150.00 -</del>	
TITLE	D SERVICES OF LANDS IN		i					
NAME STREET ADDRESS	FERNANDEZ, ORLANDO, JR 2350 CORAL WAY STE. 403							
CITY-ST-ZIP	MIAMI, FL 33145		l					
HILE	<del> </del>		1					
NAME								
STREET ADDRESS								
CITY - ST - ZIP	<del></del>		I					
TITLE NAME			1					
STREET ADDRESS			I	<b>D</b>	***			
CITY ST-ZIP			1	DO	NOT W	HILE		
TITLE			1	IN T	HIS SP	ACE		

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. If further certify that the information indicated on this report or supplied mental 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 10 or Block 11 it changed, or on an attachment by the maddress, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS

Orlando Gennandes Ir