

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. McArthur
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S51138

(3)

1. Corporation Name

MARTHA POZO-DIAZ, P.A.



Principal Place of Business

8000 W. FLAGLER ST.
SUITE 203
MIAMI FL 33144

Mailing Address

8000 W. FLAGLER ST.
SUITE 203
MIAMI FL 33144

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt., etc.

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Suite, Apt., etc.

22

City & State

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City & State

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Zip

Country

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Zip

Country

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9. Name and Address of Current Registered Agent

POZO-DIAZ, MARTHA
8000 W. FLAGLER ST.
SUITE 203
MIAMI FL 33144

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

05/07/1991

3a. Date of Last Report

03/07/1995

4. FET Number

65-0261712

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 has liability for intangible tax under S. 199.032
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.07(2) 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.07(5), Florida Statutes.

SIGNATURE

SIGNATURE OF OFFICER OR DIRECTOR

SIGNATURE OF REGISTERED AGENT

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

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POZO-DIAZ, MARTHA
8000 W. FLAGLER ST #203
MIAMI FL

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied on this form is voluntarily furnished and does not comply for the exemption stated in Section 119.07(3)(b) Florida Statutes. I further certify that the information on and based 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 resident or business empowere to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, and on any additional report with an address.

SIGNATURE:

Marta Pozo-Diaz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1594

CR2E034 (12/95)