

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # 592838 (7)

95 MAY 10 AM 10:25

1. Corporation Name

SANCHEZ, FERNANDEZ-ROCHA & POU, M.D., P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office (City/State)

**3659 S. MIAMI AVE
MIAMI FL 33133**

Mailing Address

**3659 S. MIAMI AVE
MIAMI FL 33133**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation (MM/DD/YYYY)

01/01/1979

3a. Date of Last Report

04/26/1994

4. FID Number

59-1861363

Applied For

Not Applicable

5. Certificate of Status (Domestic) ☐

**\$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 contribution for under \$100,000/
Florida Statutes ☒ Yes ☐ No

2. Director (City/State)

21

2a. Director (City/State)

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SANCHEZ, RAFAEL A.
3659 S. MIAMI AVE
MIAMI, FL 33133**

81. Name

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

83

84. City

FL

85. Zip Code

11. I, the undersigned, the president or secretary of the corporation, certify that the above signed corporation has made this statement for the purpose of changing its registered office or changing its principal office of business in Florida. Each change was authorized by the corporation's board of directors. I hereby declare this appointment as registered agent. I am a resident of the State of Florida.

SIGNATURE

[Signature]

RAFAEL A. SANCHEZ

5/4/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95

NAME

**PD
FERNANDEZ-ROCHA, LUIS
3659 S. MIAMI AVE.
MIAMI FL**

1. NAME

2. STREET ADDRESS

3. CITY

4. NAME

5. STREET ADDRESS

6. CITY

7. NAME

8. STREET ADDRESS

9. CITY

10. NAME

11. STREET ADDRESS

12. CITY

13. NAME

14. STREET ADDRESS

15. CITY

16. NAME

17. STREET ADDRESS

18. CITY

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 130.02(4), Florida Statutes. I further certify that the information included 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 any officer or director of this corporation on the return or business improvement to come on this report as required by Chapter 127, Florida Statutes, and that my name appears in Block 12, on this report, is the true and correct name of the person with an address.

SIGNATURE:

[Signature]

RAFAEL A. SANCHEZ

5/4/95 305-856-1461