

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # G13230



1. Entity Name

DAVID HERNANDEZ FINANCIAL SERVICES INC.

Principal Place of Business

1811 NORTH RIVERHILLS DR
TEMPLE TERRACE FL 33617
US

Mailing Address

1811 NORTH RIVERHILLS DR
TEMPLE TERRACE FL 33617
US



2. Principal Place of Business - No P.O. Box #

Same

3. Mailing Address

Same

1st MOORE

CR2E034 (10/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2237825

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, DAVID J.
1811 NORTH RIVERHILLS DR
TEMPLE TERRACE FL 33617

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David Hernandez

DAVID J. HERNANDEZ
PRES.

1-22-07
DATE

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

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HERNANDEZ, DAVID J	
STREET ADDRESS	1811 NORTH RIVERHILLS DR	
CITY - ST - ZIP	TEMPLE TERRACE FL 33617	
TITLE	S	<input type="checkbox"/> Delete
NAME	HERNANDEZ, IRENE	
STREET ADDRESS	1811 NORTH RIVERHILLS DR	
CITY - ST - ZIP	TEMPLE TERRACE FL 33617	
TITLE	SVT	<input type="checkbox"/> Delete
NAME	GROENE, CHANTELE	
STREET ADDRESS	1811 NORTH RIVERHILLS DR	
CITY - ST - ZIP	TEMPLE TERRACE FL 33617	
TITLE	V	<input type="checkbox"/> Delete
NAME	HERNANDEZ, DAVID K	
STREET ADDRESS	1811 NORTH RIVERHILLS DR	
CITY - ST - ZIP	TEMPLE TERRACE FL 33617	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	000000684069	
CITY - ST - ZIP	04/06/07-80017-019 150.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Hernandez

DAVID J. HERNANDEZ
PRES. 1-22-07 813-9892397

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #