2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000045576

FILED Apr 10, 2007 Secretary of State

Entity Name: BERNARDO GARCIA FUNERAL HOME (KENDALL), INC.

Current Principal Place of Business:		New Principal Place of Business:		
2050 SW IIAMI, FL	117TH AVE 33186 US			
Current Mailing Address:		New Mailing Address:		
215 BIRE MAMI, FL	ROAD 331553334 L	S		
El Number	: 65-0593653	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
6 GREEN 221 BRIC	CKELL ÁVE.	RIG,HOFFMAN,LIPOFF,ROSE	N	
he above	33131 US e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
he above	e named entity : e of Florida. RE:			
he above the State	e named entity : e of Florida. RE: Electror	nic Signature of Registered Ag		ed office or registered agent, or both, Date
The above the State SIGNATU	e named entity : e of Florida. RE: Electror mpaign Financin	nic Signature of Registered Agr	ent	Date
The above the State SIGNATU	e named entity: e of Florida. RE: Electror mpaign Financing S AND DIREC	nic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete IARDO G AD	ent	
he above the Stati GNATU Election Car DFFICER itle: lame: ddress:	e named entity : e of Florida. RE: Electror mpaign Financing S AND DIREC DP () GARCIA, BERN 8215 BIRD RO, MIAMI, FL 331	nic Signature of Registered Agr g Trust Fund Contribution (). TORS: Delete IARDO G AD 553334 Delete R R AD	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER R. MARTIN VP 04/10/2007