

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000068750

**Entity Name:** HERNANDEZ ALF INC

**Current Principal Place of Business:**

6604 N ORLEANS AVE  
TAMPA, FL 33604

**Current Mailing Address:**

6604 N ORLEANS AVE  
TAMPA, FL 33604

**FEI Number:** 26-0342033

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HERNANDEZ, LISANDRA  
6604 N ORLEANS AVE  
TAMPA, FL 33604 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            HERNANDEZ, LISANDRA  
Address        6604 N ORLEANS AVE  
City-State-Zip: TAMPA FL 33604

*I hereby 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 all other like empowered.*

**SIGNATURE:** LISANDRA HERNANDEZ

**PRESIDENT**

**03/31/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date