


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 437677
 1. Entity Name
JULIAN J. GARCIA & ASSOCIATES, INC.



Principal Place of Business 737 W. CENTRAL AVENUE WINTER HAVEN, FL 33880	Mailing Address 737 W. CENTRAL AVENUE WINTER HAVEN, FL 33880
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01072004 No Chg-P CR2E034 (10/03)

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4. FEI Number 59-1492341	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALMEYDA, EDWARD
6601 SW 80TH ST., STE 121
MIAMI, FL 33143

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE PD	GARCIA, JULIAN J
NAME	737 W. CENTRAL AVE.
STREET ADDRESS	WINTER HAVEN, FL
CITY-ST-ZIP	
TITLE S	GARCIA, MARIE G
NAME	737 W. CENTRAL AVE.
STREET ADDRESS	WINTER HAVEN, FL
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an other like empowered.

SIGNATURE:  **Julian J. Garcia** 01/08/04 (863) 294-4780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #