

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**May 19 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morikoff</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 514970 (3)**

1. Corporation Name  
**PEDRO J. HERNANDEZ, INC.**



Principal Place of Business <b>2501 S.W. 67TH AVENUE                  MIAMI FL 33155</b>	Mailing Address <b>2501 S.W. 67TH AVENUE                  MIAMI FL 33155-2919</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>11/18/1976</b>	3a. Date of Last Report <b>03/21/1996</b>
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>59-1678740</b>	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>HERNANDEZ, PEDRO J.                  1002 SW 84TH AVENUE                  MIAMI FL 33144</b>		10. Name and Address of New Registered Agent	
81. Name	<b>HERNANDEZ, PEDRO L., jr.</b>		
82. Street Address (P.O. Box Number is Not Acceptable)	<b>1002 SW 84TH AVENUE</b>		
83. City	<b>MIAMI</b>	<b>FL</b>	<b>33144</b>
84. Zip Code	<b>FL 33144</b>		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Pedro L. Hernandez, jr. - President** *Pedro L. Hernandez* DATE **5-2-97**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when terminating.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1. TITLE <b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HERNANDEZ, PEDRO J.</b>		2. NAME <b>HERNANDEZ, jr. PEDRO L.</b>	
STREET ADDRESS <b>1002 SW 84TH AVE</b>		3. STREET ADDRESS <b>1002 SW 84TH AVE.</b>	
CITY- ST- ZIP <b>MIAMI FL</b>		4. CITY- ST- ZIP <b>MIAMI FL 33144</b>	
TITLE <b>ST</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>Sr.</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HERNANDEZ, OMAIDA T.</b>		2.2 NAME <b>HERNANDEZ, sr. PEDRO J.</b>	
STREET ADDRESS <b>1002 SW 84TH AVE</b>		2.3 STREET ADDRESS <b>1002 SW 84TH AVE. 33144</b>	
CITY- ST- ZIP <b>MIAMI FL</b>		2.4 CITY- ST- ZIP <b>MIAMI, FL 33144</b>	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE <b>T</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME <b>HERNANDEZ OMAIDA T.</b>	
STREET ADDRESS		3.3 STREET ADDRESS <b>1002 SW 84TH AVE.</b>	
CITY- ST- ZIP		3.4 CITY- ST- ZIP <b>MIAMI FL 3 3144</b>	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Pedro L. Hernandez* **PEDRO L. HERNANDEZ, jr-President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/ron Phone #

CR2E034 (9/96)