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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 531161 (8)

1. Corporation Name

KAMAL TOMAS, P.A.

Principal Place of Business

1036 S.W. 1 ST.
HALEAH FL 33130
US

Mailing Address

1036 S.W. 1 ST.
HALEAH FL 33130
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1977

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 1036 S.W. 1 ST.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

City & State

23 MIAMI, FLORIDA

City & State

28

24 33130

25 US

29

Country

30

4. FEI Number

59-1746609

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.002,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICE/CANTERA &
ASSOCIATES INC.
1036 S.W. 1 ST.
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name
FLORIDA ANNUAL REPORT SERVICES INC.

82 Street Address (P.O. Box Number is Not Acceptable)
1036 S.W. 1 ST.

83

84 City

MIAMI

FL

85 Zip Code
33130

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 Sections 607.0505, Florida Statutes.

SIGNATURE

AMADA C. LOPEZ, PRES

4/25/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
S	TOMAS, MERCEDES F	190 E 49TH ST	HALEAH, FL 00000
P	TOMAS, KAMAL	190 E 49TH ST	HALEAH, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY ST ZIP

000001471950
-05/02/95--01157--013
****200.00 ****200.00

4/27

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Mercedes F. Tomas

MERCEDES F. TOMAS

4/25/95

305 545 8686