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

PROFIT 3 CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 641492

1. Corporation Name

BERNARDO GARCIA FUNERAL HOME (MIAMI), INC.

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90028 036 ***150.00



| Principal Place | of Business | Mailing Address | | | | | * | | |
|--|---|---------------------------------|----------------|------------|------------------|--|------------------------|---------------|--|
| 4100 NW 7TH ST. 8215 SW 40TH ST. | | | | | | | | | |
| MIAMI FL 33126 | Service 25. | MIAMI FL 33155-3334 | | | | DO NOT WRIT | E IN THIS SPACE | | |
| | 7 | | | | | 3. Date Incorporated or Qualifed | | | |
| | Marie Sale | | | | | 10/05/1979 | • • | | |
| | 有 等等。 | | | | | 4. FEI Number | | oplied For | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | 59-1946783 | | ot Applicable | |
| 1 26 | | | | | | 39-1940703 | | Additional | |
| Suite, Apt. # | t, etc. | Suite, Apt. #, etc. | | | | 5. Certifcate of Status Desired | □ Fee R | | |
| 2 | | 27 | - | | | | | | |
| City & State | | City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| 3 | <i>y</i> | 28 | | | | Trust Fund Contribution | | to rees | |
| Zip Country | | Zip Country | | | | 8. This corporation owes the curre | | □No | |
| 25 | | 29 | 30 | | | Personal Property Tax. Yes No. 10. Name and Address of New Registered Agent | | | |
| | 9. Name and Address of Curre | ent Registered Agent | | | | 10. Name and Address of New R | egistered Agent | | |
| | | | | 81 1 | Name | | | , | |
| MAR | TIN, PEDRO A. | • | | 82 5 | Street Add | ress (P.O. Box Number is Not Accepta | ble) | - | |
| | BRICKELL AVE. | | | - | | <u> </u> | · | | |
| | REENBERG TRAURIG | | | 83 | | | | | |
| MIAN | /II FL FL 33131 * | | | | | | 85 Zip | Code | |
| | | | | 1 1 | City | ***.* | FL T | | |
| 44 0 | to the previous of Sections 607 0 | 502 and 607 1508 Florida Stat | utes, the a | bove-n | named corp | poration submits this statement for the on's board of directors. I hereby accep | purpose of changing it | s registered | |
| office or re | egistered agent, or both, in the State | te of Florida. Such change was | authorize | d by the | e corporati | on's board of directors. I hereby accep | t the appointment as r | egistered | |
| agent. I ar | egistered agent, or both, in the Star m familiar with, and accept the obli | gations of, Section 607.0505, F | iorida Stat | iules. | | | | | |
| SIGNATURE | N | ANO | TE: Decistores | d Acent si | ionature require | ad when reinstating) | DATE | | |
| | Signature, typed or printed name of registered a | AND DIRECTORS | 13. | | grada toquii | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECT | ORS IN 12 | |
| 12. | VS | DELETE | 1.1 T | | | 4 - 7 - 14 - 1 | ☐ Change | | |
| TITLE | | | | IAME | | | • | 1 | |
| NAME | MARTIN, PETER R | | 1 | | DDDEEC | | 4.5 | | |
| STREET ADDRESS | 8215 SW 40TH ST. | | | TREET AL | l | | | : | |
| CITY-ST-ZIP | MIAMI FL | CI SCIETE | | ITY-ST-Z | ZIP | | Change | Addition | |
| TITLE | Р | ☐ DELETE | 2.1⊤ | | 1 | • | <u> </u> | _ | |
| NAME | garcia, Bernardo G | | | IAME | | | | | |
| STREET ADDRESS | | | 2.3 S | STREET AL | DDRESS | • | 4 | | |
| CITY-ST-ZIP | MIAMI FL 33155-3334 | | 2.4 | CITY-\$T-2 | ZIP | <u> </u> | FT Change | Addition | |
| TITLE | VT | ☐ DELETE | . 3.1 T | ITLE | | | Change | , DAddison | |
| NAME | HERNANDEZ, RAUL | | 3.2 N | NAME | | | | | |
| STREET ADDRESS | 8215 SW 40TH ST. | | 3.3 9 | STREET A | DORESS | 5 3679 88762213 | er iki oji nashiri na | | |
| CITY-ST-ZIP | MIAMI FL 33155-3334 | | 3.4. | CITY-ST- | ZIP | | | 37, 7 114 4 | |
| TITLE | V | ☐ DELETE | 4.17 | TITLE | | | ு இன்தி ். [☐ Change | Addition | |
| NAME | GARCIA, DOLORES | | 4. 2 | NAME | } | | | | |
| STREET ADDRESS | COAE CW ACTU CT | • | 4.3 5 | STREET A | ODRESS | • | 6 g - 6 | | |
| | MIAMI FL 33155-3334 | | 4.4 (| CITY-ST- | ZIP | | · <u>-</u> | | |
| CITY-ST-ZIP | 17117 WILL 1 E 00 100 000 1 | ☐ DELETE | | TITLE | | | ☐ Chang | e 🔲 Addition | |
| TITLE | | —- | | NAME | | | | | |
| NAME | | | | STREET A | ADDRESS | • | | | |
| STREET ADDRESS | | | • | CITY-ST- | | | | | |
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| NAME | | | ì | • | IDDEEC | | • | - 3 4 | |
| STREET ADDRESS | | | | STREET A | 1 | Ŧ | | | |
| CITY-ST-ZIP | | | 6.4 | CITY-ST | ZIP | | | | |

14. 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 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, with all other like empowered.