

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 6:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name 650806
ORLANDO & AURELIA REYES P.A
4011 W. Flagler St. # 504
Miami, FL, 33134-1643

Principal Place of Business Mailing Address

4011 W. Flagler St. # 504
Miami, FL, 33134-1643

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

1/10/80

4. FEI Number Applied For
59-2012125 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation has liability for intangible tax under s. 199.03,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23

28

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Orlando E. Reyes
4011 W. Flagler St. # 504
Miami, FL, 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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

Signature of agent or certified holder of registered agent and the corporation

NOTE: Registered Agent signature required when recording.

15A

12. OFFICERS AND DIRECTORS

TITLE P/D
NAME Orlando E. Reyes
STREET ADDRESS 4011 W. Flagler St. #504, Miami, FL
CITY ST ZIP

TITLE V/D
NAME Aurelia Reyes
STREET ADDRESS 4011 W. Flagler St. #504, Miami, FL
CITY ST ZIP

TITLE S/T
NAME Lourdes Reyes
STREET ADDRESS 4011 W. Flagler St. #504, Miami, FL
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS 100001476681
14 CITY ST ZIP -05/05/95--01007--025
****200.00 ****200.00

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b) Florida Statutes. I further certify that the information furnished in 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. 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 or change is in an attachment with an address.

SIGNATURE

Orlando E. Reyes President

541-2140

NAME OF SIGNING OFFICER OR DIRECTOR