PROFIT CORPORATION ANNUAL REPORT 1997 DOCUMENT # 683671 Corporation Name PEDRO REFERRAL SERVICES, INC. Principal Pace of Business Mailing Address	Apr 29 1997 8:00am Secretary of State
1997 Division of corporations DOCUMENT # 683671 (2) PEDRO REFERRAL SERVICES, INC. (2)	
PEDRO REFERRAL SERVICES, INC.	
Principal Page of Business Mailing Address	a 1988-1998 Balada valanda derba daraka kata daken mata daken daram darak dagan daram katan natu
Fillendal Place Of Bosiness Maining Address 419 W. 49TH ST. 418 W. 49TH ST. 406 #106 HALEAH FL 33012 HIALEAH FL 33012-3655	
US US	3. Date Incorporated or Qualified 3e. Date of Last Report 10/01/1980 05/01/1996
2. Principal Place of Business 28. Mailing Address 21 26	4. FEI Number Applied For 59-2412921 Not Applicable
Suite, Apt #, etc. 22 27 27	5. Certificate of Status Desired Status Desired Fee Regulred
City & State 23 28 28	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country Zip Country 24 25 29 30	This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
9. Name and Address of Current Registered Agent HERNANDEZ, PEDRO F. 81 Name	10. Name and Address of New Registered Agent HERNANDEZ, PEDRO F.
	drass (P.O. Box Number is Not Acceptable)
83	
	MIAMI LAKES FL ⁸⁵ 33016
 Pursuant to the provisions of Sections 607.0502 and 607, 1508, Florida Statutes, the above-named c office or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. Lam familier with, and accept the obligations of, Section 607.0505, Florida Statutes. 	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature, type 1 Separated name of registerics agent and the 4 applicance. (NOTE Registered Agent signature re	
P DELETE DITULE ULED VANDEZ DEDDO E 11 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME HERNANDEZ, PEDRO F. 1.2 NAME STREE ACCIDITISS 6703 KINGSMOORE WAY 1.3 STREEF ADDRESS	15110 FALKIRK PLACE
CITY-ST-ZIP MIAMI LAKES FL 114 CITY-ST-ZIP DULE DELETE 21 TITLE	MIAMI LAKES, FL 33016
riaghi 2.2 NAME	
STFEFT ACORESS 2.3 STREET ACORESS CITY-ST-ZIP 2.4 CITY-ST-ZIP	
	Change Addition
NAME 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS	
CITY - ST - ZIP 34 CITY - ST - ZIP 34 CITY - ST - ZIP 11/1/2 11/2 11/2 11/2 11/2 11/2 11/2 1	Change L Addition
NAME 4.2 NAME	
4.3 STREET ADDRESS	
C(1Y - S1 - ZIP 44 C(FY - ST - ZIP 11/LE 51 T)TLE	Change D Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY_ST_ZIP 54 CITY_ST_ZIP	
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NAME 62 NAME 63 STREET ADDRESS 63 STREET ADDRESS	
■ 0.3 Synter ADDNESS I	
C(TV - S1 - 7) ²	
CPV-S1-ZP 64 CITY-S1-ZP 64 CITY-S1-ZP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption station information indicated on this annual report or supplemental annual report is true and accurate and the second sec	hat my signature shall have the same legal effect as if made under oath; that
CITY-SI-ZP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption sta	hat my signature shall have the same legal effect as if made under oath; that
64 CITY-S1-ZP 64 CITY-S1-ZP 64 CITY-S1-ZP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption station makes and accurate and the second accurate	hat my signature shall have the same legal effect as if made under oath; that