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PROFIT CORPORATION ANNUAL REPORT

1998



TLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1998 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

NAME

STREET ADDRESS

G13230

(9)

DAVID HERNANDEZ FINANCIAL SERVICES INC. Principal Place of Business Mailing Address 4815 E BUSCH BLVD 4815 E BUSCH BLVD #109 DO NOT WRITE IN THIS SPACE **TAMPA FL 33617** TAMPA FL 33617 3. Date Incorporated or Qualified 12/14/1982 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 111 BULLARD 26 111 BULLARD KARKWAY Not Applicable 59-2237825 Suite, Apt. #, etc \$8.75 Additional 5, Certificate of Status Desired 22 Suite 21 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees FEMBLE 8. This corporation owes or has paid the current year Intangible 29 33617 ☐ Yes 25 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HERNANDEZ, DAVID J. 4815 E BUSCH BLVD Street Address (P.O. Box Number is Not Acceptable) 82 **STE 109 TAMPA FL 33617** 211 11. Pursuant to the previsions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the abligations of, Section 607.0505, Florida Statutes.

SIGNATURE SIGNATURE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13 DELETE TITLE 1.1 TITLE Change Addition NAME HERNANDEZ, DAVID J 1.2 NAME STREET ADDRESS 4815 E BUSCH BLVD STE 109 1.3 STREET ADDRESS TAMPA FL 1.4 CITY - \$1 - ZIP CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME HERNANDEZ, IRENE 2.2 NAME STREET ADDRESS 4815 E BUSCH BLVD STE 109 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 31 TITLE **GROENE, CHANTELLE** 3 2 NAME NAME 4815 E BUSCH BLVD STE 109 STREET ADORESS 3.3 STREET ADDRESS TAMPA FL 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition NAME HERNANDEZ, DAVID K 4 2 NAME STREET ADDRESS 4815 E BUSCH BLVD STE 109 4.3 STREET ADDRESS TAMPA FL 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE 52 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP

14. Thereby 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 suppliemental 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

SIGNATURE:

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ DELETE