

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 18 PM 2:29

DOCUMENT # G96666

(4)

1. Corporation Name

DIAZ & BATISTA, P.A.

Principal Place of Business
**1840 W 49 STREET #105
HIALEAH FL 33012**

Mailing Address
**1840 W 49 STREET #105
HIALEAH FL 33012**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/18/1984

3a. Date of Last Report
01/25/1994

4. FBI Number
59-2430931

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. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 **255 Altamira Circle**

2a. Mailing Address

26 **255 Altamira Circle**

Suite Apt. #, etc

22 **420**

Suite Apt. #, etc

27 **420**

City & State

23 **Coral Gables FLA**

City & State

28 **Coral Gables FLA**

Zip

24 **33134**

Country

25 **USA**

Zip

29 **33134**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**BATISTA, JOSE R.E., ESQ.
1840 W 49 STREET SUITE 105
HIALEAH FL 33012**

10. Name and Address of New Registered Agent

81 Name

82 Street Address or P.O. Box Number is Not Acceptable

255 Altamira Circle Suite 420

83

84 City

Coral Gables

FL

85 Zip Code

33134

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 Sections 607.0602 and 607.1508, Florida Statutes.

SIGNATURE

Jose R.E. Batista

1995

12. OFFICERS AND DIRECTORS

1. NAME

2. STREET ADDRESS

3. CITY & STATE

4. ZIP

5. PHONE

6. FAX

7. E-MAIL

8. SIGNATURE

9. DATE

10. SIGNATURE

11. DATE

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13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME

2. STREET ADDRESS

3. CITY & STATE

4. ZIP

5. PHONE

6. FAX

7. E-MAIL

8. SIGNATURE

9. DATE

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41. DATE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-95 (305) 446-0001