

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # H03043

1. Entity Name
DANIEL J. FERNANDEZ, P.A.



Principal Place of Business

C/O DANIEL J. FERNANDEZ
777 S. HARBOUR ISLAND BLVD., SUITE 255
TAMPA, FL 33602

Mailing Address

C/O DANIEL J. FERNANDEZ
777 S. HARBOUR ISLAND BLVD., SUITE 255
TAMPA, FL 33602



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2397163

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, DANIEL J
777 SOUTH HARBOUR ISLAND BLVD.
ONE HARBOUR PLACE, SUITE 255
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	FERNANDEZ, DANIEL J	777 S. HARBOUR BLVD. #255	TAMPA, FL

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel J. Fernandez 02/01/08 (813) 229-5353

Date

Daytime Phone #