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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H05245 (6)

1. Corporation Name
SIMON B. MIRANDA, P.A.

Principal Place of Business
% SIMON B. MIRANDA
7800 SW 87TH AVE., #230
MIAMI FL 33173-3570

Mailing Address
% SIMON B. MIRANDA
7800 SW 87TH AVE., #230
MIAMI FL 33173-3570



2. Principal Place of Business

21 Suite, Apt. #, etc. 250

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc. 250

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
05/18/1984

3a. Date of Last Report
10/07/1996

4. FEI Number

59-2418215

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

9. Name and Address of Current Registered Agent

MIRANDA, SIMON B.
7800 SW 87TH AVE., #230
MIAMI FL 33173-3570

10. Name and Address of New Registered Agent

81 Name

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

83 STE. 250

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME MIRANDA, SIMON B
STREET ADDRESS 7800 SW 87TH AVE., #230
CITY-ST-ZIP MIAMI FL 33173-3570

TITLE VPS
NAME MIRANDA, MARIA DEL CARM
STREET ADDRESS 1300 SW 132ND AVE.
CITY-ST-ZIP MIAMI FL 33184

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby 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 supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Simon B. Miranda, P.A.

04-21-97 (25) 598-6335

CR2E034 (9/96)