

1985

DIVISION OF CORPORATIONS

DOCUMENT # J85685

(6)

1. Corporation Name

FUNERARIA BROWARD, INC.

96 APR 14 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5980 W OAKLAND PARK BLVD
LAUDERHILL FL 33313

Mailing Address

5980 W OAKLAND PARK BLVD
LAUDERHILL FL 33313

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/06/1987

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2791706

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under S. 100.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

PORTELA, JOSE M
5980 W OAKLAND PARK BLVD
FT LAUDERDALE FL 33313

10. Name and Address of New Registered Agent

81 Name

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

83

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

PORTELA, JOSE M. SR

STREET ADDRESS

5980 W OAKLAND P B

CITY - ST - ZIP

LAUDERHILL FL

TITLE

TD

NAME

LAGO, ROBERTO GONZALEZ

STREET ADDRESS

5980 W OAKLAND P B

CITY - ST - ZIP

LAUDERHILL FL

TITLE

SD

NAME

LAGO, MARIA GONZALEZ

STREET ADDRESS

5980 W OAKLAND P B

CITY - ST - ZIP

LAUDERHILL FL

TITLE

D

NAME

PORTELA, BEATRIZ

STREET ADDRESS

5980 W OAKLAND P B

CITY - ST - ZIP

LAUDERHILL FL

TITLE

PD

NAME

PORTELA, JOSE M. JR

STREET ADDRESS

5980 W OAKLAND P B

CITY - ST - ZIP

LAUDERHILL FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

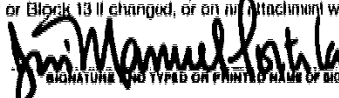
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:



Jose M. Portela Jr.

3-31-95

484-1833

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone (Area #)