

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J68496** (5)
1. Corporation Name
MERCEDES S. CANTRELL, P.A.

Principal Place of Business P O BOX 11455 ST PETERSBURG FL 33733-1455	Mailing Address P O BOX 11455 ST PETERSBURG FL 33733-1455
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 P. O. Box 612603 Suite, Apt. #, etc. 22 City & State 23 Miami, FL Zip 24 33261		2a. Mailing Address 26 P. O. Box 612603 Suite, Apt. #, etc. 27 City & State 28 Miami, FL Zip 29 33261		3. Date incorporated or Qualified 04/16/1987	
25 Dade		30 Dade		4. FEI Number 59-2783314 Applied For Not Applicable	
2. Principal Place of Business		2a. Mailing Address		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
21 P. O. Box 612603		26 P. O. Box 612603		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
22		27		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23 Miami, FL		28 Miami, FL			
24 33261		29 33261			
25 Dade		30 Dade			

9. Name and Address of Current Registered Agent CANTRELL, MERCEDES S. 6377 CAPE HATTERAS WAY NE ST PETERSBURG FL		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 14311 Biscayne Blvd. 83 84 City Miami, FL 85 Zip Code	
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANTRELL, MERCEDES S.	1.2 NAME	
STREET ADDRESS	6377 CAPE HATTERAS WAY NE	1.3 STREET ADDRESS	14311 Biscayne Blvd.
CITY - ST - ZIP	ST PETERSBURG FL	1.4 CITY - ST - ZIP	Miami, FLorida
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANTRELL, WALTER J.	2.2 NAME	
STREET ADDRESS	6377 CAPE HATTERAS WAY	2.3 STREET ADDRESS	14311 Biscayne Blvd.
CITY - ST - ZIP	ST PETERSBURG FL	2.4 CITY - ST - ZIP	Miami, Florida
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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:

Walter J. Cantrell (WALTER J. CANTRELL) 4-14-98

CR2E034 (10/97)