PROFIT CORPORATION ANNUAL REPORT

<u> 1999</u>



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90066 042 ***150.00

D	OCL	JMENT	#	K1	0287	7
_	_				ULU !	

1. Corporation Name

LAW OFFICES OF JOSEPH HENRY FERNANDEZ, P.A.

Principal Place	of Business	Mailing Address				Dir Alati bibit aratt misti brock indi		
9130 S. DADELAND BLVD. SUITE 1701 MIAMI FL 33156		9130 S. DADELAND BLVD. Suite 1701 Miami Fl 33156		DO NOT WRITE IN THIS SPACE				
WILLIAM I E OUISC		**************************************			Date Incorporated or Qualifed 12/31/1987			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For		
21	•	26			65-0025260	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State)	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip 29	Country 30	,	This corporation owes the current year Personal Property Tax.	Intangible No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
LAW OFCS. OF FERNANDEZ, JOSEPH H. TWO DATRAN CENTER 9130 S DADELAND BLVD.			81	Name	(D.O. Roy Ni, wher is Net Assessable)			
			04	Street Add	ress (P.O. Box Number is Not Acceptable)	•		
SUITE 1701			83					
MIAM	II FL 33156		84	City		85 Zip Code		
			104	City	F	EL 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 n	equired when reinstating)	DATE	
12.	OFFICERS AND DIREC	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	FERNANDEZ, JOSEPH HENRY		1.2 NAME			
STREET ADDRESS	8353 S.W. 5TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1,4 CITY-ST-ZIP			
TITLE	•	DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS	·		2.3 STREET ADDRESS			_
CITY-ST-ZIP	·		2.4 CITY-ST-ZIP			<u> </u>
IIITE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME		,	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		<u> </u>	
TITLE	· -	DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		·	5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS	the transfer of the second section is	← ∪. ,——	6.3 STREET ADDRESS			
CITY, ST. 7IP			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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99 305-670-1818 4/29199 - Dayling Phone # ;R2E034 (11/98)