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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **POCUMENT** #

M06444

(7)

LUIS F. FERNANDEZ & ASSOCIATES, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1881 - 18 81 - 1881 - 1881 - 1881 - 1881
10434 S.W. 21ST TERR. 10434 S.W. 21ST TERR.					
MIAMI FL 33165 MIAMI FL 33165				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3 37 702
				10/15/1984	
2. Principal Pi	NW 37 AVE	2a. Mailing Address	~ th A .~	4. FEI Number	Applied For
21 80 /	NM DI THE	26 801 NW 3	7" AVE	59-2456012	Not Applicable
Suite, Apt	作りる	Suite, Apt. #, etc.	12	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	mi, FL.	City & Shale 28 MAN F	<u></u>	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7ip > 2 / \ C	Country	8. This corporation owes or has paid the o	current year Intangible
24 351		29 35/25 3	USA	Personal Property Tax due June 30.	Yes No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Name and Address of New Registered Agent					
	RNANDEZ, LUIS F.		01 Ivaille		
10434 SW 21 TERRACE MIAMI FL 33165			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
ļ wir	1171 F L 05 105		B3		
			84 City		85 Zip Code
7,				F	
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					
12.	Signature types or present some of registered agr	est and the Tupple able (NOTE: F ID-DIRECTORS	legistered Agent signature require 13.	od when reinslating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	☐ DELETE	1.1 TITLE	TIDDITION OF THE TIME TO STATE THE TIME THE TIME TO STATE THE TIME	Change Addition
NAME	FERNANDEZ, LUIS F.		1.2 NAME		1
STREET ADDRESS	10434 SW 21ST TERR		13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		14 CITY-ST-ZIP		
TITLE	VSD	☐ DELETE	2.1 TITLE		Change Addition
NAME	FERNANDEZ, NANCY H.		2.2 NAME		
STREET ADDRESS	10434 SW 21 TERR.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2.4 CITY-S1-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$1-ZIP			3.4. CITY - ST - 71P		
TITLE		☐ DELETE	4.1.1iTuE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DECETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME CTREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	****	DELETE	5.4 Crty - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP	4	
	certify that the information supplied w	ith this filing does not qualify for f		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 outh; that I am an officer or director of the corporation of 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 a report an appear with an authorise.