

FILE NOW: FILING FEE AFTER MAY 14 6:25 PM

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Marjorie B. Matsum
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M18158
1. Corporation Name

~~Bernardo Garcia Brake Funeral Home Corporation~~
Bernardo Garcia Funeral Home (Westchester), Inc.

Principal Place of Business	Mailing Address
8215 S.W. 40th Street Miami, Florida 33155-3334	8215 S.W. 40th Street Miami, Florida 33155-3334

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 7/18/84	3a. Date of Last Report 1/24/94
4. FEI Number 59-2582235	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under § 199.022, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 8215 S.W. 40th Street Suite, Apt. #, etc.	26 8215 S.W. 40th Street Suite, Apt. #, etc.
22 City & State Miami, Florida	27 City & State Miami, Florida
23 Zip 33155-3334	28 Country USA
24 Zip 33155-3334	25 Country USA
29 Zip 33155-3334	30 Country USA

8. Name and Address of Current Registered Agent
Pedro A. Martin
1401 Brickell Avenue
Miami, Florida 33126

10. Name and Address of New Registered Agent

81 Name Pedro A. Martin, Esq.
82 Street Address (P.O. Box Number is Not Acceptable) Greenberg Traurig
83 1221 Brickell Avenue
84 City Miami
85 Zip Code FL 33131

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: Pedro A. Martin DATE: 4-27-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D Bernardo Garcia 7101 Lago Drive West Coral Gables, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Allen Brake 4100 N.W. 7th Street Miami, Florida 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P Bernardo Garcia 8215 S.W. 40th Street Miami, Florida 33155-3334	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VP, S Peter R. Martin 8215 S.W. 40th Street Miami, Florida 33155-3334	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	VP, T Raul Hernandez 8215 S.W. 40th Street Miami, Florida 33155-3334	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	VP Dolores M. Garcia 8215 S.W. 40th Street Miami, Florida 33155-3334	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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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, on an agreement with an address.

SIGNATURE: [Signature] DATE: 4-28-95
Signature, typed or printed name of signing officer or director