

DOCUMENT # M56173
1. Corporation Name
D-F JIMENEZ & ASSOCIATES, INC.



Principal Place of Business
C/O DAISY JIMENEZ
5936 S.W. 11 ST.
MIAMI FL 33144

Mailing Address
C/O DAISY JIMENEZ
5936 S.W. 11 ST.
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

3. Date Incorporated or Qualified
07/24/1987

4. FEI Number
59-2810149

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
JIMENEZ, DAISY
5936 S.W. 11 ST.
MIAMI FL

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 reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
D	JIMENEZ, FRANK T.	5936 S.W. 11 ST.	MIAMI FL	<input type="checkbox"/>
D	JIMENEZ, DAISY	5936 S.W. 11 ST.	MIAMI FL	<input type="checkbox"/>
D	JIMENEZ, FRANK R.	5936 S.W. 11 ST.	MIAMI FL	<input checked="" type="checkbox"/>
D	JIMENEZ, MARCOS D.	1510 MENDAVIA AVE.	MIAMI FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1	1.2	1.3	1.4	
2.1	2.2	2.3	2.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1	3.2	3.3	3.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1	4.2	4.3	4.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1	5.2	5.3	5.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1	6.2	6.3	6.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Frank T. Jimenez* President 4/29/99 305-262-0422

CR2E034 (11/98)