

AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000006431 (7)

1. Corporation Name

DENNIS MARTINEZ FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O CASTILLO & ASSOCIATES  
1390 BRICKELL AVENUE SUITE 200  
MIAMI FL 33131

C/O CASTILLO & ASSOCIATES  
1390 BRICKELL AVENUE SUITE 200  
MIAMI FL 33131

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT

98

3. Date Incorporated or Qualified

11/14/1997

4. FEI Number

65-0871923

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASTILLO B., ALVARO ESQ  
C/O CASTILLO & ASSOCIATES  
1390 BRICKELL AVENUE SUITE 200  
MIAMI FL 33131

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11-8-98

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME MARTINEZ, DENNIS  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

TITLE DV ☐ DELETE

NAME MARTINEZ, LUZ  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

TITLE DT ☐ DELETE

NAME ARGUELLO, ROBERTO  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

TITLE DS ☐ DELETE

NAME CASTILLO, ALVARO  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

TITLE DAS ☐ DELETE

NAME SHAPIRO, RON  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☐ DELETE

NAME GARCIA, FRANCISCO REV.  
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200  
CITY-ST-ZIP MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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\*\*\*\*\*236.25 \*\*\*\*\*236.25

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 668-2508

0004602

CR2E037 (5/98)