

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 APR 15 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000074531

1. Entity Name
GUILLERMO J. FERNANDEZ-QUINCOSES, P.A.



Principal Place of Business
200 S BISCAYNE BLVD, 41ST FLOOR
MIAMI, FL 33131

Mailing Address
200 S BISCAYNE BLVD, 41ST FLOOR
MIAMI, FL 33131



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1038386	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FERNANDEZ-QUINCOSES, GUILLERMO J ESQ
200 S BISCAYNE BLVD, 41ST FLOOR
MIAMI, FL 33131

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FERNANDEZ-QUINCOSES, GUILLERMO J ESQ
STREET ADDRESS	200 S BISCAYNE BLVD, 41ST FLOOR
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/23/04--01023--017 **150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Guillermo J. Fernandez-Quincoeses* **1/26/04** **305-577-7018**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #