


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90018 050 ***150.00

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



Principal Place of Business Mailing Address

100 SE 2ND ST 100 SE 2ND ST
 34TH FLOOR 34TH FLOOR
 MIAMI, FL 33131 MIAMI, FL 33131

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

100 SE 2nd Street 100 SE 2nd Street

Suite # 1600 Suite # 1600

City & State City & State

Miami, FL Miami, FL

Zip Country Zip Country

33131 US 33131 US

40043051



03062008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For

65-1038386 Not Applicable

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

6. Name and Address of Current Registered Agent

FERNANDEZ-QUINCOCES, GUILLERMO J ESQ
 100 SE 2ND ST
 34TH FLOOR
 MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name
 Guillermo J. Fernandez-Quincoces, Esq.

Street Address (P.O. Box Number is Not Acceptable)
 100 SE 2nd Street

Suite 1600

City State Zip

Miami FL 33131

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 *Guillermo J. Fernandez-Quincoces* Guillermo J. Fernandez-Quincoces 3/10/08

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing \$5.00 May Be Added to Fees

Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	FERNANDEZ-QUINCOCES, GUILLERMO J ESQ	100 SE 2ND ST 34TH FLOOR	MIAMI, FL 33131	<input type="checkbox"/>
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D	Fernandez-Quincoces, Guillermo J.	100 SE 2nd Street, Suite 1600	Miami, FL 33131	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 information empowered.

SIGNATURE: *Guillermo J. Fernandez-Quincoces* 3/10/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Guillermo J. Fernandez-Quincoces, Director