

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000078785

1. Entity Name
JENNIFER VAZQUEZ, P.A.



Principal Place of Business
**15267 S.W. 22ND TERRACE
MIAMI, FL 33185**

Mailing Address
**15267 S.W. 22ND TERRACE
MIAMI, FL 33185**



08042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
57-1179026

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**VAZQUEZ, JENNIFER M
15267 S.W. 22ND TERRACE
MIAMI, FL 33185**

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
VAZQUEZ, JENNIFER M
15267 S.W. 22ND TERRACE
MIAMI, FL 33185**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
VAZQUEZ, JENNIFER M
15267 S.W. 22ND TERRACE
MIAMI, FL 33185**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

U000000378138

08/11/05-80001-014 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Jennifer M. Vazquez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/5/05

305 490 4906
Date Daytime Phone