

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030760

Entity Name: JOAQUIN MENDEZ JR. P.A.

FILED
Jun 01, 2005
Secretary of State

Current Principal Place of Business:

3290 RIVIERA DR
CORAL GABLES, FL 33134

New Principal Place of Business:

100 S.E. 2ND STREET
MIAMI, FL 33131

Current Mailing Address:

3290 RIVIERA DR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 80-0098057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDEZ, JOAQUIN JR
3290 RIVIERA DR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MENDEZ, JOAQUIN JR
Address: 3290 RIVIERA DR
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: MENDEZ, JOAQUIN JR
Address: 100 S.E. 2ND STREET
City-St-Zip: MIAMI, FL 33131

Title: AS () Change (X) Addition
Name: MENDEZ, HILDA M
Address: 100 S.E. 2ND STREET
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAQUIN MENDEZ

D

06/01/2005

Electronic Signature of Signing Officer or Director

Date