

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 8:00 am**  
**Secretary of State**

01-25-2007 90029 023 \*\*\*150.00

DOCUMENT # P04000135399

1. Entity Name  
ANDRES QUINTERO & ASSOCIATES PA



Principal Place of Business

~~2320 SW 57TH AVENUE~~  
~~202~~  
~~MIAMI, FL 33155~~ US

Mailing Address

2320 SW 57TH AVENUE  
~~202~~  
MIAMI, FL 33155 US

60006104



2. Principal Place of Business / No P.O. Box #

2199 Vance DeLeon Blvd.  
Suite, Apt. #, etc.  
201

3. Mailing Address

2199 Vance DeLeon Blvd.  
Suite, Apt. #, etc.  
201

City & State  
CORAL GABLES, FL

City & State  
CORAL GABLES, FL

Zip  
33134

Country  
DADE

Zip  
33134

Country  
DADE

01122007 Chg-P CR2E034 (12/06)

4. FEI Number  
59-2039406

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CORDOVA, DIEGO E  
8905 SW 87TH AVENUE  
200  
MIAMI, FL 33176

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. QUINTERO, ANDRES A 2320 SW 57TH AVENUE SUITE 202 MIAMI, FL 33155	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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 like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/07 301/444-3744  
Date Daytime Phone #



**ATTACHMENT**  
# 60006104  
**Division of Corporations**

**2007 Annual Report**

**Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the  
annual report form.**

This information cannot be changed on the report.	
Document Number	P04000135399
Business Entity Name	ANDRES QUINTERO & ASSOCIATES PA
Original File Date	10/01/2004

FEI Number        59-2039406

Principal Address   2320 SW 57TH AVENUE  
                             202  
                             MIAMI, FL 33155 US

Mailing Address    2320 SW 57TH AVENUE  
                             202  
                             MIAMI, FL 33155 US

Registered Agent   DIEGO E CORDOVA  
                             8905 SW 87TH AVENUE  
                             200  
                             MIAMI, FL 33176 US

**Officer/Director Name And Address**

P  
ANDRES A QUINTERO  
2320 SW 57TH AVENUE SUITE 202  
MIAMI, FL 33155 US

If all of the above  
information is correct and  
you do not wish to make  
any changes, please  
select:

If you need to make  
changes to the above  
information, please  
select:

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