


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

08 SEP 15 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P06000105780			
1. Entity Name HERNANDEZ INSTALLATION CORP			
Principal Place of Business 7002 N HALE ST TAMPA, FL 33614		Mailing Address 7002 N HALE ST TAMPA, FL 33614	
2. Principal Place of Business - No P.O. Box # 6903 N. Thatcher Ave.		3. Mailing Address 6903 N. Thatcher Ave.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Tampa FL		City & State Tampa FL	
Zip 33614		Zip 33614	
Country U.S.A.		Country U.S.A.	
6. Name and Address of Current Registered Agent HERNANDEZ, RODOLFO 7002 N HALE ST TAMPA, FL 33614		7. Name and Address of New Registered Agent Name: <u>HERNANDEZ ROLANDO</u> Street Address (P.O. Box Number is Not Acceptable): <u>6903 N. THATCHER AVE</u> <u>TAMPA FL 33614</u> City: <u>FL</u> Zip Code: <u></u>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, RODOLFO 7002 N HALE ST TAMPA, FL 33614 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100136107371 09/18/08--01049--025 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HERNANDEZ, ROLANDO 7002 N HALE ST TAMPA, FL 33614 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ ROLANDO 6903 N. THATCHER AVE TAMPA FL 33614 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>09/12/08</u> Daytime Phone # <u></u>	