

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000005641 (5)

1. Corporation Name
LOPEZ TAX SERVICES, INC.

Principal Place of Business 2900 W 12TH AVE SUITE 14 HIALEAH FL 33012	Mailing Address 2900 W 12TH AVE SUITE 14 HIALEAH FL 33012
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/16/1992 4. FEI Number 65-0363961 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent

LOPEZ, TERESA J
3427 SW 88TH CT
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name	MARCIA P. Hernandez
82 Street Address (P.O. Box Number is Not Acceptable)	2900 W. 12th Av. Suite 14
83	
84 City	Hialeah
85 FL	Zip Code 33012

11. Pursuant to the provisions of Sections 607.0402 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE:  Marcia P. Hernandez 3/14/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	D, President Secretary
NAME	LOPEZ, JOSE	1.2 NAME	MARCIA P. Hernandez
STREET ADDRESS	2900 W 12TH AVE	1.3 STREET ADDRESS	2900 W 12th Av. Suite 14
CITY-ST-ZIP	HIALEAH FL 33012	1.4 CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	DV	2.1 TITLE	
NAME	LOPEZ, TERESA J	2.2 NAME	
STREET ADDRESS	2900 W 12TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33012	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: 

3/14/98 X(305) 887 8075

CR2E034 (10/97)