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FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000032259 (2)

1. Corporation Name

JOSEPH A. FERNANDEZ & ASSOCIATES, INC.

Principal Place of Business

1240 WELLINGTON TERR.  
MAITLAND FL 32751  
US

Mailing Address

1240 WELLINGTON TERR.  
MAITLAND FL 32751-3448  
US



3. Date Incorporated or Qualified

05/04/1993

3a. Date of Last Report

05/08/1996

4. FEI Number

65-0413430

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 1484 E. LAKE Woodlands Pkwy.

Suite, Apt. #, etc.

22 City & State  
23 Oldsmar, Florida

24 Zip

34677

25 Country

USA

2a. Mailing Address

26 1484 E. LAKE Woodlands Pkwy

Suite, Apt. #, etc.

27 City & State  
28 Oldsmar, Florida

29 Zip

34677

30 Country

USA

9. Name and Address of Current Registered Agent

FERNANDEZ, MANUELA  
1240 WELLINGTON TERR.  
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1484 E. LAKE Woodlands Pkwy.

83

84 City

Oldsmar

FL

85 Zip Code

34677

11. Pursuant to the provisions of Sections 607.0502 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME FERNANDEZ, JOSEPH A  
STREET ADDRESS 1240 WELLINGTON TERR.  
CITY-ST-ZIP MAITLAND FL

TITLE ST ☐ DELETE

NAME FERNANDEZ, MANUELA  
STREET ADDRESS 1240 WELLINGTON TERR.  
CITY-ST-ZIP MAITLAND FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 1484 E. LAKE Woodlands Pkwy  
1.4 CITY-ST-ZIP Oldsmar, Florida 34677

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS 1484 E. LAKE Woodlands Pkwy  
2.4 CITY-ST-ZIP Oldsmar, Florida 34677

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE:

MANUELA FERNANDEZ

1-16-97

Date

813-771-9614

Daytime Phone

CR2E034 (9/96)