FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000061510 (2)**

1. Corporation Name
GARCIA FUNERAL HOMES, INC.

Principal Place of Business
7445 N.W. 8TH ST.
MIAMI FL 33126

Mailing Address
7445 N.W. 8TH ST.
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/02/1993**
3a. Date of Last Report: **04/25/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or P.O. Box — 22 / 27
City & State — 23 / 28
Zip — 24 / County — 25 / Zip — 29 / County — 30

4. FEI Number: **65-0437991** ☐ 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 authority to transact business under Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GARCIA, JOSE M
7445 N.W. 8TH ST.
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 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

12. OFFICERS AND DIRECTORS

Title	D
Name	GARCIA, JOSE M
Street Address	7445 N.W. 8TH ST.
City-State-Zip	MIAMI FL 33126
Title	
Name	
Street Address	
City-State-Zip	
Title	
Name	
Street Address	
City-State-Zip	
Title	
Name	
Street Address	
City-State-Zip	
Title	
Name	
Street Address	
City-State-Zip	
Title	
Name	
Street Address	
City-State-Zip	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	
Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	
Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	
Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	
Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	
Title	☐ Change ☐ Addition
Name	
Street Address	
City-State-Zip	

14. I hereby certify that the information supplied with this filing is 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 added on an attachment with an address.

SIGNATURE: JOSE M. GARCIA 4/30/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0124314 CP