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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90031 044 ***150.00

NT # **P94000003253**

EZ, P.E., P.A.

	DOCUMEN 1. Corporation Name	T
	G.J. SANCHEZ,	P
	Principal Place of Busin	ess
	3301 MONEGRO ST. CORAL GABLES FL 3313	4 '
		-
•	Principal Place of Bu	
	2. Principal Place of 80	
	Suite, Apt. #, etc.	
-	22	· -
	City & State	
	23	
	Zip	
	24	
	9. Nai	ne
	SANCHEZ, G 3301 MONEF MIAMI FL 33	(GC

Mailing Address

3301 MONEGRO ST. CORAL GABLES FL 33134	3301 MONEGRO ST. CORAL GABLES FL 33134		DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualifed 01/13/1994			
2. Principal Place of Business	2a. Mailing Address	*	4. FEI Number	Applied For		
21	26		65-0464951	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip : Country 24 25	Zip C	ountry	This corporation owes the current year Int Personal Property Tax.	angible XYes □No		
9. Name and Address of Cui	rrent Registered Agent	10. Name and Address of New Registered Agent				
SANCHEZ, GONZALO J		81 Name 82 Street Addre	ess (P.O. Box Number is Not Acceptable)			
3301 MONERGO STREET		02 Street Address (F.O. Box Natition is Not Acceptable)				
MIAMI FL 33134		83				
		84 City	FL	85 Zip Code		
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob	ate of Florida. Such change was authoriz	ed by the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoi	changing its registered ntment 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. (N	NOTE: Registered Agent signature re-	quired when reinstation)	DATE		<u> </u>				
12.	OFFICERS AND DIRECTORS	13.		GES TO OFFICERS AF	ND DIRECTOR	RS IN 12				
TITLE	D DELETE	1,1 TITLE		10.11	☐ Change	Addition				
NAME	SANCHEZ, GONZALO J	1.2 NAME								
STREET ADDRESS	3301 MONEGRO ST.	1.3 STREET ADDRESS				ļ				
CITY-ST-ZIP	CORAL GABLES FL 33134	1.4 CITY-ST-ZIP								
TITLE	☐ DELETE	2.1 TTTLE			Change	☐ Addition				
NAME		2.2 NAME				1				
STREET ADDRESS		2.3 STREET ADDRESS								
.CITY-ST-ZIP		2.4 CITY-ST-ZIP	<u>* :-</u> .	- Land of the contract of the						
TITLE	DELETE	3.1 TITLE			Change	☐ Addition				
NAME		3.2 NAME				l				
STREET ADDRESS		3.3 STREET ADDRESS				Ì				
CITY-ST-ZIP		3.4. CITY-ST-ZIP		A 1						
TITLE	☐ DELETE	4.1 TITLE			☐ Change	☐ Addition				
NAME		4. 2 NAME								
STREET ADDRESS	•	4.3 STREET ADDRESS			•	ĺ				
CITY-ST-ZIP		4.4 CITY-ST-ZIP								
TITLE	DELETE	5.1 TITLE			Change	Addition				
NAME		5.2 NAME	·			.				
STREET ADDRESS		5.3 STREET ADDRESS								
CITY-ST-ZIP		5.4 CITY-ST-ZIP								
TITLE	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition				
NAME		6.2 NAME				ļ				
STREET ADDRESS		6.3 STREET ADDRESS				{				
CITY-ST-ZIP	<u></u>	6.4 CITY-ST-ZIP		<u>'</u>						

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 in an attachment with an address, with all other like empowered.

SIGNATURE: