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

Mailing Address

PO DRAWER 100

LUFKIN TX 75902-0100

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000036719

1. Corporation Name

Principal Place of Business

250 EAST 4 AVENUE HIALEAH FL 33010

SAN JOSE FUNERAL HOMES, INC.

					00/10/1007				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Ap	plied For	
1 1929 ALLEN PARKWAY 26 P O BOX 130548					65-0490993		No	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75		
22 10 TH FLOOR 27 .					v. Certificate of oldings besided	<u> </u>	Fee Re	quired	
City & State City & State				-	6. Election Campaign Financing	П	\$5.00	May Be	
HOUSTON TX 28 HOUSTON TX					Trust Fund Contribution		Added t	o Fees	
Zip Country Zip Cour					8. This corporation owes the cur			_	
24 77019 25 USA 29 77219-0548 30				Α _	Personal Property Tax.		Yes	□No	
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
				81 Name					
GARCIA, JOSE M				82 Street Address (P.O. Box Number is Not Acceptable)					
7445 NW 8 STREET				Substitution (1.5. Sex) I i i i i i i i i i i i i i i i i i i					
MIAMI FL 33126									
er e j. N. Francisco							les Zin	Code	
	and the second of the second o		84	City	•	FL	85 Zip	Code	
11 December the remaining of Continue 607 0502 and 607 1508 Elevida Statutos, the at				e-named o	corporation submits this statement for the	purpose of o	hanging its	registered	
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 reinstelling) DATE									
	Signature, typed or printed name of registered agent a		egistered Agen	t signature re	ADDITIONS/CHANGES TO O		DIRECTO	PS IN 12	
12.	OFFICERS AND	DIRECTORS ▼ DELETE	1.1 TITLE		PRESIDENT	1102.107.11	▼ Change	☐ Addition	
TITLE	P	XI DELEIE		Į			AL O∷Bilgo		
NAME	HUNTER, JAMES P III		1.2 NAME	j	JOSEPH A BRANDENBURG				
STREET ADDRESS	415 S FIRST STREET SUITE 210		1.3 STREET	1	1929 ALLEN PARKWAY			ļ	
CITY-ST-ZIP	LUFKIN TX 75901		1,4 CITY-S	r-ZIP	HOUSTON TX 77019				
TITLE	VPAS		2.1 TITLE	1	VP		X Change	☐ Addition	
NAME	GERNER, CARDON W		2.2 NAME	- 1	KENNETH W CONKLIN			{	
STREET ADDRESS	415 S FIRST STREET SUITE 210	·	2.3 STREET	ADDRESS	1929 ALLEN PARKWAY			ļ	
CITY-ST-ZIP	LUFKIN TX 75901		2.4 CITY-S	T-ZIP	HOUSTON TX 77019				
TITLE	V	X DELETE	3,1 TITLE	_	VP		X- Change	· Addition	
NAME	WELLS, BILLY C		3.2 NAME	(RAY A GIPSON				
STREET ADDRESS	415 S FIRST STREET SUITE 210		3.3 STREET		1929 ALLEN PARKWAY			Ì	
CITY-ST-ZIP	LUFKIN TX 75901		3.4. CITY-S	T-ZIP	HOUSTON TX 77019			1	
TITLE			4.1 TITLE	-			X Change	☐ Addition	
NAME	PARKER, SUSANNE C	TT ·	4, 2 NAME		VP			į.	
	415 S FIRST STREET SUITE 210		4.3 STREET	ADDDESS	CURTIS G BRIGGS	,			
STREET ADDRESS				1	1929 ALLEN PARKWAY				
CITY-ST-ZIP	LUFKIN TX 75901 V	X) DELETE	4.4 CITY-S	1-211"	HOUSTON TX 77019		(X) Change	Addition	
TITLE	l <u>*</u>	M) occur	5.1 IIILE	ļ	SECREARY SUZANNE DINEFF				
NAMÉ :	PACE, BRENT		5.3 STREET	ADDRESS	1929 ALLEN PARKWAY				
STREET ADDRESS	415 S FIRST STREET SUITE 210		5.4 CITY-S		HOUSTON TX 77019			}	
CITY-ST-ZIP	LOF NIV TX 75901		6.1 TITLE	1-£1F			Change	Addition	
TITLE	X occes		6.2 NAME]	TREAUSER				
NAME	GREENE, TAYLOR			- ADDOCCO	JOHN H. LOHMAN, JR			ļ	
STREET ADDRESS	415 S FIRST STREET SUITE 210			(ADDRESS	1929 ALLEN PARKWAY			İ	
CITY-ST-ZIP 1	LUFKIN TX 75901	41.3 (20) 4 4 100 5 1	6.4 CITY-S		HOUSTON TX 77019	I further a	ifu that the	nformation	
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 on an attachment with an address, with all other like empowered.									

SIGNATURE:

FILED Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90023 037 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

05/16/1004