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

PROFIT CORPORATION ANNUAL REPORT

1998

7



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000037300 (8)

ALVAREZ FUNERAL HOME, INC.

Mailing Address Principal Place of Business

FILED Apr 22 1998 8:00am Secretary of State



| 4150 FORSYTH ROAD WINTER PARK FL 32782 | | 4150 FORSYTH ROAD WINTER PARK FL 32792 | | DO NOT WRITE IN THIS SPACE | | | |
|-------------------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------|--------------------------|
| | | | | | Date Incorporated or Qualified 05/13/1994 | | |
| 2. Principal P | 2. Principal Place of Business 2a. Mailing Address | | | | 4. FEI Number | Ap | otied For |
| 21 | | 26 | 26 | | 59-3128705 | 59-3128705 Not Applie | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | \$8.75 Additional | | dditional |
| 22 | | 27 | 27 | | 5, Certificate of Statos Desired | Fee Re | quired |
| City & State | | City & State | City & State | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | | | Trust Fund Contribution | Added to | Fees |
| Zip | Country | Zip | Count | ry | 8. This corporation owes or has paid the c | | |
| 24 | 25 29 | | | Personal Property Tax due June 30. Yes No | | | No |
| | 9, Name and Address of Cure | ent Registered Agent | 8 | 41 | 10. Name and Address of New Registered | Agent | |
| VESPOLI, ANTONIO | | | | 1 Name | | | |
| 4150 FORSYTH ROAD | | | 8 | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| WINTER PARK FL 32792 | | | | | | | |
| | | | 8 | 3 | | | ŀ |
| | | | 8 | 1 1 | F | | İ |
| 11. Pursuant office or report. La | to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the ob- | 502 and 607.1508, Florida Statu ate of Florida. Such change was ligations of, Section 607.0505, Fl | tes, the abo authorized l orida Statut | ve-named cor by the corpora es. | rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap | of changing its pointment as | registered registered |
| | | · · · · · · · · · · · · · · · · · · · | | | | | |
| SIGNATURE | Signature, typed or printed name of registered | agent and trie if applicable (NO | IF Registered A | gent signature requ | uirad when reinstating) DATE | | |
| 12. | OFFICERS A | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| TITLE | D | DELETE | 1.1 HTLE | | | Change | Addition |
| Name | VESPOLI, ANTONIO | | 1.2 NAM | E | | | |
| STREET ADDRESS | | | 1.3 STRE | et address | | | |
| CITY-ST-ZIP | WINTER PARK FL | | 1.4 CITY - ST - ZIP | | | | |
| TITLE | DELE te | | 21 TITLE | | | Change | ☐ Addition |
| NAME | | | 2.2 NAM | E | | | |
| STREET ADDRESS | | | 23 STRE | et address | | | |
| CITY-ST-ZIP | | | 2. 4 CITY | '-ST-ZIP | | | |
| TITLE | DELETE | | 3.1 TITLE | | | Change | Addition |
| NAME | | | 3.2 NAM | E | | | |
| STREET ADDRESS | | | 3.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY | -ST-ZIP | | | |
| TITLE | DELETE | | 4.1 TITLE | | | Change | Addition |
| NAME | | | 4. 2 NAM | Œ j | | | |
| STREET ADDRESS | | | 4.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY | -ST-ZiP | | | |
| TITLE | DELETE | | 5.1 TOTUE | | | ☐ Change | Addition |
| NAME | | | 5.2 NAM | E | | | |
| STREET ADDRESS | • | | 5.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY | -S1-ZIP | | | |
| TITLE | DELETE | | 6.1 TITLE | | | Change | Addition |
| NAME | | | 6.2 NAM | E | | | |
| STREET ADDRESS | | | 6.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY | -ST-ZIP | | | |

14. 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.