

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000072754

1. Corporation Name

GARCO PROFESSIONAL SERVICES, INC.

Principal Place of Business

Mailing Address

**9531 FONTAINEBLEAU BLVD.
SUITE 111
MIAMI, FL 33172**

**800001472698
-05/03/95--01039--002
****200.00 ****200.00**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10-03-94

3a. Date of Last Report

N/A

4. FEI Number

65-0525619

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 SAME

26 SAME

Suite, Apt. #, etc

Suite, Apt. #, etc

22 SAME

27 SAME

City & State

City & State

23 SAME

28 SAME

24 SAME

25 USA

29 SAME

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARLOS HENENDEZ
15601 SW 90 AVENUE
MIAMI, FL 33157**

81 Name STEVEN GARCIA

**82 Street Address (P.O. Box Number is Not Acceptable)
9531 FONTAINEBLEAU BLVD.**

83 SUITE 111

84 City MIAMI

FL

85 Zip Code 33172

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 **STEVEN GARCIA, PRESIDENT**

(Signature must be printed name of registered agent and title of corporation)

(Signature must be printed name of registered agent and title of corporation)

2-25-95

(Date)

12. OFFICERS AND DIRECTORS

**TITLE PRESIDENT, D.
NAME CARLOS HENENDEZ
STREET ADDRESS 15601 SW 90 AVE
CITY, ST, ZIP MIAMI, FL 33157**

**TITLE VICE PRESIDENT, S., D.
NAME STEVEN GARCIA
STREET ADDRESS 9531 FONTAINEBLEAU BLVD. SUITE 111
CITY, ST, ZIP MIAMI, FL 33172**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE PRESIDENT, D. ☒ Change ☐ Addition
1.2 NAME STEVEN GARCIA
1.3 STREET ADDRESS 9531 FONTAINEBLEAU BLVD, SUITE 111
1.4 CITY, ST, ZIP MIAMI, FL 33172**

**2.1 TITLE V., S., D. ☒ Change ☐ Addition
2.2 NAME MARTHA L. GARCIA
2.3 STREET ADDRESS 9531 FONTAINEBLEAU BLVD. SUITE 111
2.4 CITY, ST, ZIP MIAMI, FL 33172**

**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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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:

STEVEN GARCIA

STEVEN GARCIA

(Signature and typed or printed name of signing officer or director)

2-25-95

(Date)

551-3782

(Telephone Number)