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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

EDUARDO J. GARCIA, P.A.

P95000014506 (6)

## **FILED** May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						I I Barratt sid haid, after datte saue sarri sars vider siner anne anne ante non-	
1101 BRICKELL AVE		1101 BRICKELL AVE					
702 SOUTH		702 SOUTH				DO NOT WRITE IN THIS SPACE	
MIAMI FL 33131 US		MIAMI FL 33131 US				3. Date Incorporated or Qualified	$\neg$
00		00				02/21/1995	
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number Applied Fo	,
21		26				65-0558379 Not Applica	able
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5 Cortificate of Status Desired Status Desired Status Desired	一
22		27				Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	h h		h1	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 9. Name and Address of Currer	29   of Registered Agent	30	<u> 101</u>		10. Name and Address of New Registered Agent	$\dashv$
CAL	RCIA, EDUARDO J			81	Name		
	1 BRICKELL AVE		L.	00	Ot 8 4 4 -	(D.O. Day Mumber is Not Assentable)	
	702 SOUTH		82 Street Ac		Street Addr	ress (P.O. Box Number is Not Acceptable)	
	MI FL 33131		Ī	83			$\neg$
MICHINI 1 L 33 13 1			ļ.	84	City	85 Zip Code	
•			['	04	City	FL 63 ZIP COUR	i
SIGNATURE	Signature typing or printed name of registered ago	er and the diapplication (No	DTE: Registered			red when reinstating)  DATE	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add	itian
TITLE	PVSD	☐ DELETE	1.1 TITE				IIIO11
NAME	GARCIA, EDUARDO J 1101 BRICKELL AVE STE 702	ane	1.2 NA		4 DODECC		
STREET ADDRESS	MIAMI FL	203			ADDRESS		
CITY-ST-ZiP Title	MICHAEL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		1-711	☐ Change ☐ Add	ition
NAME			2.2 NAME			_ · _	1
STREET ADDRESS			2.3 STREET AD		ADDRESS		İ
CITY-ST-ZIP			2. 4 CIT				
TITLE		☐ DELETE	DELETE 3.1 TITL			Change Add	ition
NAME			3.2 NAI	ME			
STREET ADDRESS			3.3 STF	REET	ADDRESS		
CITY-ST-ZIP			3.4. C(1	TY-S	ST- ZIP		
TITLE		[]] DELETE	4.1 TITI	LE		Change Add	ition
NAME			4. 2 NA				
STREET ADDRESS					ADDRESS	/ )	
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NAME			5.2 NAS		1000000	400/-/6	
STREET ADDRESS					ADDRESS	11/900	1
CITY-ST-ZIP TITLE		☐ DÉLETE	5.4 CIT 6.1 TITI		1 - ZIP	Change Add	ition
NAME			6.2 NA			<del>-</del> ::	
STREET ADDRESS					ADDRESS	300002532393 -05/22/9801004017	
1			6.4 C/T			***150.00	
CITY-ST-ZIP	portify that the information supplied y	with this filing does not qualify				Section 119.07(3)(i). Florida Statutes, I further certify that the information	lion

Indicated on this annual report or supplies with rins litting odes not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplies on the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or in an attachment with an address.