

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000016362 (1)

1. Corporation Name

CENTRAL LEGAL LATINO, INC.

Principal Place of Business

Mailing Address

2390 OAK RIDGE RD
ORLANDO FL 32839

2390 OAK RIDGE RD
ORLANDO FL 32839

FILED
Sep 17 1997 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

02/19/1996

N-A

4. FEI Number

59-3400990

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 2390 W. OAK RIDGE RD.

Suite, Apt. #, etc.

22 City & State

ORLANDO, FL.

24 Zip

32809

Country

ORANGE

2a. Mailing Address

26 2390 W. OAK RIDGE RD.

Suite, Apt. #, etc.

27 City & State

ORLANDO, FL.

29 Zip

32809

Country

ORANGE

9. Name and Address of Current Registered Agent

GARCIA, FREY A
2390 OAK RIDGE RD
ORLANDO FL 32839

10. Name and Address of New Registered Agent

81 Name

ALTAGRACIA L. GARCIA

82 Street Address (P.O. Box Number is Not Acceptable)

2390 W. OAK RIDGE RD.

83

84 City

ORLANDO,

FL

85 Zip Code

32809

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

ALTAGRACIA L. GARCIA

9-14-97

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☒ DELETE

NAME FREY A. GARCIA
STREET ADDRESS 2390 W. OAK RIDGE RD.
CITY-ST-ZIP ORLANDO, FL., 32809

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME ALTAGRACIA L. GARCIA
1.3 STREET ADDRESS 2390 W. OAK RIDGE RD.
1.4 CITY-ST-ZIP ORLANDO, FL., 32809

2.1 TITLE SECRETARY ☐ Change ☒ Addition

2.2 NAME KARINA BAUTISTA
2.3 STREET ADDRESS 2390 W. OAK RIDGE RD.
2.4 CITY-ST-ZIP ORLANDO, FL., 32809

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 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, changed, or on an attachment with an address.

SIGNATURE

ALTAGRACIA L. GARCIA, 9-14-97 407-888-3535

CR2E034 (4/97)