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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000049550 (2)

LUIS HERNANDEZ-ABREU, D.M.D., P.A.

Principal Place of Business
DADA CIN 197TH AVE

SUITE 221

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

23

MIAM! FL 33175

Mailing Address

2450 SW 137TH AVE SUITE 221

MIAMI FL 33175

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

FILED Apr 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

PRESIDENT, LUIS, HERNANDEZ- ABREU

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

3. Date Incorporated or Qualified

<u>65-0674352</u>

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

06/10/1996 4. FEI Number

24	25	29	30	'7	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
HE	ERNANDEZ-ABREU. LUIS		8	1 Name	
13	1091 N KENDALL DR		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)
1	AMI FL 33186		٦	Street Add	tess (F.O. Dox (40) hoof is 140) hoodplacity
minute 1 c 00100				3	
[1	4 City	85 Zip Code
			l°	• City	FL 85 Zip Code
office or r	registered agent, or both, in the State of	of Florida, Such change w	as authorized l	ov the corporal	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. Fa	am familiar with, and accept the obligat	ions of, Section 607.0505	, Florida Statut	9S.	• • • • • • • • • • • • • • • • • • • •
SIGNATURE	Signature, typed or printed name of registered agent		1076 6 111		red when reinstating) DATE
12.	OFFICERS AND		13.	geni signatura requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPVS OF TOUR NAME	DELETE	1.1 TITLE		Change Addition
NAME	HERNANDEZ-ABREU, LUIS		1.2 NAM		
STREET ADDRESS	13091 N KENDALL DR			ET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY		
TITLE	T	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HERNANDEZ-ABREU, LUIS		2.2 NAM	Y	
STREET ADDRESS	13091 N KENDALL DR			ET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186		2. 4 CITY		
TITLE	Albani i E do log	DELETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAM		_ ,
STREET ADDRESS			3.3 STRE	ET ADDRESS	
CITY-ST-ZIP			3.4. CiTY		
TITLE		DELETE	4.1 TiTLE		Change Addition
NAME			4. 2 NAM	E	
STREET ADDRESS				ET ADDRESS	·
CITY-ST-ZIP			4.4 CITY		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAMI	: [
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAM	:	
STREET ADDRESS			6.3 STRE	ET ADDRESS	
CITY-ST-ZIP			6.4 CITY	1	
14. I hereby o	certify that the information supplied will	n this filing does not quali	ly for the exem	ption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated officer or	on this annual report or supplemental director of the corporation or the recei-	annual report is true and ver or trustee empowered	accurate and to to execute this	nat my signatu s report as redi	re shall have the same legal effect as If made under oath; that I am an uired by Chapter 607, Florida Statutes; and that my name appears in
Block 12	or Block 13 if changed, own an atlact	nnyent with an address.		1 0	uired by Chapter 607, Florida Statutes; and that my name appears in