PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000063759

1. Corporation Name

ABREU GONZALEZ FUNERAL HOMES, INC.

Principal Place	e of Business	Mailing Address				I BERNES NO NENE BURA BOND BOND BOND ABOND BURD NENE NENE BURD BURD BURD BOND BOND BOND BOND BOND BOND BOND BON
6851 S.W. 40TH STREET MIAMI FL 33155 MIAMI FL 33155						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 07/30/1996
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For 65-0687388 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifca:e of Status Desired S8.75 Ad ditional Fee Required
City & Stat	9	City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Count y	Zip 29	30	untry		8. This corporation owes the current year Intangible Personal Property Tax. Yes [] No
	9. Name and Address of Current	Registered Agent		Ţ		10. Name and Address of New Registered Agent
				81	Name	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				82	Street	Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	FI_ 85 Zip Ccde
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was a	authorize	d by	the corpo	d corporation submits: this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURIE						
	Signature, typed or printed nan e of registered agent	· — — — — — — — — — — — — — — — — — — —		d Agen	t signature re	requi ed when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR 3 IN 12
TITLE	D		1.1 T	ITLE		I) ☐ Change 【文】 Addition
NAME	LOEWEN, RAYMOND L		1.2 N	AME		PAUL WAGLER
STREET ADDRESS	4126 NORLAND AVENUE		1.3 S	TREET	ADDRESS	4126 NORLAND AVENUE
CITY-ST-ZIP	BURNABY, BC CANADA V5G 3S	58	1.4 0	ITY-S	T-ZIP	BURNABY, B.C., CANADA V5G 3S8
TITLE	DAS	☐ DELETE	2.1 T	ITLE		V Change X Addition
NAME	HYNDMAN, PETER S		2.2 N	AME		SEAN M. GILCHRIST
STREET ADDRESS	4126 NORLAND AVENUE		2.3 9	TREET	ADDRESS	801 TEAS ROAD
CITY-ST-ZIP	BURNABY, BC CANADA V5G 3S	8	2.40	CITY-S	T-ZIP	CONROE, TX 77303-1606
TITLE	VP	☐ DELETE	3.1 T			P X Change Addition
NAME	CASHNER, JEFFREY L		3.2 N	AME		
STREET ADDRESS	801 TEAS ROAD		3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP	CONROE TX 77303		3.4. 0	CITY-S	T-ZIP	
TITLE	P	☐ DELETE	4.1 T	TLE		V ∑ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 true 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, with a little empowered.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

GEORGE M. AMATO

4145-58th STREET

WOODSIDE, NY 11377

JOSEPH T. HARDIMAN

CONROE, TX 77303-1606

801 TEAS ROAD

4.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

RUSSELL, ROBERT D

200 NORTH FEDERAL HIGHWAY

POMPANO BEACH FL 33062

ROLLINGS, GREGORY R

JONESBORO GA 30236

3190 TREMONT AVENUE

TREVOSE PA 19053-6693

681 NORTH AVENUE

MILLER, LAWRENCE

SIGNAL PETER S HYNDMAN NG OFFICES: OR DIRECTOR

K DELETE

K) DELETE

APRIL 19, 1999

FILED

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90010 001 ***150.00

(604) 299-9321 Daytime Phone #

☐ Change

Change

CR2E034 (11/98)

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X Addition

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