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Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90072 009 ***150.00

07/06/97

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000010363

1. Corporation Name
JORGE A. LOPEZ, P.A.

Principal Place of Business

~~2500 NW 70TH AVE~~
~~SUITE 210~~
~~MIAMI FL 33122~~
US

Mailing Address

~~2500 NW 70TH AVE~~
~~SUITE 210~~
~~MIAMI FL 33122~~
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1997

4. FEI Number
65-0730515

Applied For
Not Applicable

2. Principal Place of Business

21 6100 S.W. 76 STREET
Suite, Apt. #, etc.

2a. Mailing Address

26 6100 S.W. 76 STREET
Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23

City & State
MIAMI FL

28

City & State
MIAMI FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

Zip
33143

25

Country
USA

29

Zip
33143

30

Country
USA

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

LOPEZ, JORGE A ESQ
~~2500 NW 70TH AVE~~
~~SUITE 210~~
~~MIAMI FL 33122~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
6100 S.W. 76 STREET

83

84 City
MIAMI

85

Zip Code
33143

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 *J. Lopez, President*

April 6, 1999

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS DELETE

TITLE P
NAME LOPEZ, JORGE A
STREET ADDRESS ~~2500 NW 70TH AVE, SUITE 210~~
CITY-ST-ZIP ~~MIAMI FL 33122~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 6100 S.W. 76 STREET
1.4 CITY-ST-ZIP MIAMI, FLORIDA 33143

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *J. Lopez, President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 6, 1999

Date

(305) 666-3820

Daytime Phone #

CR2E034 (11/98)