Feb 22, 1999 8:00 am

Secretary of State

02-22-1999 90103 032 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000029274

1. Corporation Name

ED GARCIA, INC.

'	ce of Business	Mailing Add						
5821 CHURCHILL CIRCLE 5821 CHURCHILL CIRCLE WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405				105		DO NOT WRITE IN THIS SPACE		
						Date Incorporated or Qualifed		
						04/01/1997		
2. Principal f	Place of Business	2a. Mailing	Address			4. FEI Number Applied For		
21		26				65-0820984 Not Applicable		
Suite, Apt	. #, etc.	Suite, A	pt. #, etc.			5 Contifered of Status Decised \$8.75 Additional		
22		27				Fee Required		
City & Sta	ite	City & S	State			6. Election Campaign Financing\$5.00 May Be		
23		28	_			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	r	Count	ry	8. This corporation owes the current year Intangible		
24	25	29		30		1 dischart reports rank		
	9. Name and Address of Curre	ent Registered Ag	ent	8	1 Name	10. Name and Address of New Registered Agent		
GAI	RCIA, HERIBERTO			Ľ	Name			
5821 CHURCHILL CIRCLE				8	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
					3			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DITALIN BEACHTE 60400				١			
					4 City	FL 85 Zip Code		
office or	t to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida.Such	change was au	uthonzea c	y the corpora	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered:		
SIGNATURE						outred when reinstating) DATE		
10	Signature, typed or printed name of registered as		(NOTE:	Registered Ac	jent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	D OFFICERS F	AND DIRECTORS	DELETE	1.1 TITLE	T	HER LOCAL GARCIA Change Addition		
NAME	GARCIA, ED		F-4	1.2 NAM		HEIRI berto GARCIA Michange Addition 5821 Church: 11 Eincle WPB, 121 3340		
STREET ADDRESS	OUR DOUBLE OFF				ET ADDRESS	3821 6/0/2011		
	WEST PALM BEACH FL 3340	ıs		1.4 CITY		WP3, 101 23743		
CITY-ST-ZIP	WEST FALM BEACHTTE 3540		DELETE	2.1 TITLE		Change Addition		
NAME				2.2 NAM				
STREET ADDRESS	g			1	ET ADDRESS			
CITY-ST-ZIP	3			2. 4 CITY				
TITLE	+		DELETE.	3.1 TITLE		☐ Change ☐ Addition		
NAME				3.2 NAM	E			
STREET ADDRESS	s			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP				3,4, CITY	-ST-ZIP			
TITLE			DELETE	4,1 TITLE		☐ Change ☐ Addition		
NAME	ļ			4. 2 NAM	E	•		

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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



☐ DELETE

DELETE

☐ Change

Change

☐ Addition

☐ Addition