## 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 # P97000049324 (1)

RAYMOND HERNANDEZ, P.A.

Principal Place of Business	Mailing Address
1111 NORTH WESTSHORE BLVD. #210 TAMPA FL 33607	1111 NORTH WESTSHORE BL TAMPA FL 33607

## **FILED** Apr 07 1998 8:00am Secretary of State



VD. #210 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/04/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible X Yes 24 No. 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name HERNANDEZ, RAYMOND 1111 NORTH WESTSHORE BLVD. #210 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33607** 83 ₿4 City Zip Code 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 (NCIT: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE PVST 1.1 TITLE HERNANDEZ, RAYMOND NAME 1.2 NAME 1111 NORTH WESTSHORE BLVD. #210 STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33607** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE HERNANDEZ, RAYMOND NAME 2.2 NAME STREET ADDRESS 1111 NORTH WESTSHORE BLVD. #210 2.3 STREET ADDRESS **TAMPA FL 33607** CITY-ST-ZIP 2 4 CITY-ST-7IP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - S1 - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP ☐ DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 of the pocary or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, and a place of the corporation of the pocary of the corporation of

SIGNATURE

CR2E034