

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 19, 1999 8:00 am
Secretary of State

07-19-1999 90007 007 ***155.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # P97000053322

1. Corporation Name

RODRIGUEZ-ECHEVERRIA & ASSOCIATES, P.A.

Principal Place of Business

**330 SW 27 AVENUE SUITE 605
MIAMI FL 33135**

Mailing Address

**330 SW 27 AVENUE SUITE 605
MIAMI FL 33135**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1997

4. FEI Number

65-0762327

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 SAME AS ABOVE
Suite, Apt. #, etc.

26 SAME AS ABOVE
Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent.

**RODRIGUEZ-ECHEVERRIA, M. VICTORIA
330 SW 27 AVENUE SUITE 605
MIAMI FL 33135**

81 Name

SAME AS ABOVE

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

[Signature]

7/7/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PVST** ☐ DELETE
NAME **RODRIGUEZ-ECHEVERRIA, M. VICTORIA**
STREET ADDRESS **330 SW 27 AVENUE SUITE 605**
CITY-ST-ZIP **MIAMI FL 33135**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/99

(305) 541-7400
Daytime Phone #

CR2E034 (5/99)

S90351-90007-7
P97000053322

LAW OFFICES OF
RODRIGUEZ-ECHEVERRIA & ASSOCIATES, P.A.

M. VICTORIA RODRIGUEZ-ECHEVERRIA

330 SOUTH WEST 27TH AVENUE
SUITE 605

MIAMI, FLORIDA 33135

TELEPHONE: (305) 541-7400

TELEFAX: (305) 541-5877

OF COUNSEL
ANASTASIA M. GARCIA
BHAVANI "BONNIE" NIRMAL

July 7, 1999

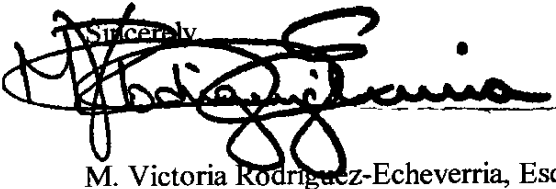
Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Please be advised that I am in receipt of the 1999 Profit Corporation Annual Report Packet. It indicates that this is the 2nd notice sent to my address. However, I have yet to receive the first notice. Additionally, the notice that was actually received (2nd notice) did not arrive in the mail to our office but delivered to us by another of the building tenants to whom said notice was delivered by mistake.

Upon receipt of said notice, I contacted a representative in your office. I was instructed to send \$155.00 for payment of filing fee along with this letter of explanation. Accordingly, I am enclosing said payment along with the completed 1999 Profit Corporation Annual Report Packet.

Should you have any questions, please do not hesitate to contact us.

Sincerely,

M. Victoria Rodriguez-Echeverria, Esq.