

06-22-1999 90003 030 15a00

FILE NOW: 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 # P98000009875			
1. Corporation Name FRANCISCA RESIDENCES, INC.			
Principal Place of Business 914 SW 31 AVE MIAMI FL 33135		Mailing Address 914 SW 31 AVE MIAMI FL 33135	
2. Principal Place of Business		2a. Mailing Address	
21. Suite, Apt. #, etc.		2a. Suite, Apt. #, etc.	
22. City & State		27. City & State	
23. Zip		28. Zip	
24. Country		29. Country	
9. Name and Address of Current Registered Agent SANTOS, ROSENDO A 914 SW 31 AVE MIAMI FL 33135		10. Name and Address of New Registered Agent	
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.		12. OFFICERS AND DIRECTORS	
SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE		1.1 TITLE	
2. NAME		1.2 NAME	
3. STREET ADDRESS		1.3 STREET ADDRESS	
4. CITY-ST-ZIP		1.4 CITY-ST-ZIP	
5. TITLE		2.1 TITLE	
6. NAME		2.2 NAME	
7. STREET ADDRESS		2.3 STREET ADDRESS	
8. CITY-ST-ZIP		2.4 CITY-ST-ZIP	
9. TITLE		3.1 TITLE	
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY-ST-ZIP		3.4 CITY-ST-ZIP	
13. TITLE		4.1 TITLE	
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY-ST-ZIP		4.4 CITY-ST-ZIP	
17. TITLE		5.1 TITLE	
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY-ST-ZIP		5.4 CITY-ST-ZIP	

FILED

99 OCT -5 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/30/1998	
4. FEI Number 65-0812903	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No	

SIGNATURE: *Francisca Residences, Inc.* REQUIRED

Date Daytime Phone #



Select Insurance Agency

305-220-7776

P. 1

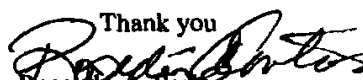
Att Tyron

October 7, 1999

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Att: Division of Corporation
RE: Francisca's Residence
914 SW 31 ave
Miami, Fl. 33135

Please be advise that I am respectfully requesting my late fee be waived for Francisca Residence
Inc. Doc # P98000009875. Due to the reason that I received my annual report after the May
deadline. Also the check that was sent has been cashed.

Thank you

Rosepido A. Santo