

999-90099-049-\$150.00-\$150.00

**FILED**  
**Mar 11, 1999 8:00 am**  
**Secretary of State**

03-11-1999 90099 049 \*\*\*150.00

**PROFIT**  
**CORPORATION**  
**ANNUAL REPORT**  
**1999**



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

DOCUMENT # P98000035925

1. Corporation Name

AVELINO HERNANDEZ ENTERPRISES INC.



Principal Place of Business

7105 W 13 AVE #202  
 HIALEAH FL 33014

Mailing Address

7105 W 13 AVE #202  
 HIALEAH FL 33014

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1998

4. FEI Number

65-0816388

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

2. Principal Place of Business

21 5376 PALM AVE

2a. Mailing Address

26 5376 PALM AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

23 HIALEAH FL

City &amp; State

27 HIALEAH FL

Zip

24 33012

Country

25 USA

Zip

29 33012

Country

30

9. Name and Address of Current Registered Agent

HERNANDEZ, AVELINO  
 7105 W 13 AVE #202  
 HIALEAH FL 33014

10. Name and Address of New Registered Agent

81 Name

Avelino Hernandez

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

83 830 West 68th Street

84 City

Hialeah

FL

85 Zip Code

33012

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

Avelino Hernandez

(NOTE: Registered Agent signature required when resigning)

DATE

1-18-99

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE  
 NAME HERNANDEZ, AVELINO  
 STREET ADDRESS 7105 W 13 AVE #202  
 CITY-ST-ZIP HIALEAH FL 33014

TITLE VSD ☐ DELETE  
 NAME HERNANDEZ, ANA Y  
 STREET ADDRESS 7105 W 13 AVE #202  
 CITY-ST-ZIP HIALEAH FL 33014

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
 1.2 NAME  
 1.3 STREET ADDRESS 830 W 68th Street  
 1.4 CITY-ST-ZIP HIALEAH FL 33012

2.1 TITLE ☒ Change ☐ Addition  
 2.2 NAME  
 2.3 STREET ADDRESS 830 W 68th Street  
 2.4 CITY-ST-ZIP HIALEAH FL 33012

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

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

5.1 TITLE ☐ Change ☐ Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 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:

Avelino Hernandez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-18-99 305-823-9132

CR2E034 (1/98)