

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

**FILED**  
**Feb 23, 1999 8:00 am**  
**Secretary of State**

02-23-1999 90068 035 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**DOCUMENT # P98000043631**

1. Corporation Name

**MARTINEZ-WALSH ENTERPRISES, INC.**

Principal Place of Business

**516 CAMDEN AVENUE  
STUART FL 34994**

Mailing Address

**516 CAMDEN AVENUE  
STUART FL 34994**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/10/1998**

4. FEI Number

**05-0842043**

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 2420 SW 15th Terr**

Suite, Apt. #, etc.

**22 Palm City FL.**

**23 34990 USA**

2a. Mailing Address

**26 2420 SW 15th Terr.**

Suite, Apt. #, etc.

**27 Palm City, FL.**

**28 34990 USA**

9. Name and Address of Current Registered Agent

**ANDERSON, WILLIAM D JR.  
516 CAMDEN AVENUE  
STUART FL 34994**

10. Name and Address of New Registered Agent

81 Name

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**1.1 TITLE D**  
**1.2 NAME ANDERSON, WILLIAM D JR.**  
**1.3 STREET ADDRESS 516 CAMDEN AVENUE**  
**1.4 CITY-ST-ZIP STUART FL 34994**

☐ DELETE

**2.1 TITLE**  
**2.2 NAME**  
**2.3 STREET ADDRESS**  
**2.4 CITY-ST-ZIP**

☐ DELETE

**3.1 TITLE**  
**3.2 NAME**  
**3.3 STREET ADDRESS**  
**3.4 CITY-ST-ZIP**

☐ DELETE

**4.1 TITLE**  
**4.2 NAME**  
**4.3 STREET ADDRESS**  
**4.4 CITY-ST-ZIP**

☐ DELETE

**5.1 TITLE**  
**5.2 NAME**  
**5.3 STREET ADDRESS**  
**5.4 CITY-ST-ZIP**

☐ DELETE

**6.1 TITLE**  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY-ST-ZIP**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE Pamela E. Walsh DISC**  
**1.2 NAME 2420 S.W. 15th Terr**  
**1.3 STREET ADDRESS Palm City, FL. 34990**  
**1.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**2.1 TITLE Medardo Martinez DTP**  
**2.2 NAME 190 S. Hibiscus Dr.**  
**2.3 STREET ADDRESS Miami, FL. 33139**  
**2.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**3.1 TITLE**  
**3.2 NAME**  
**3.3 STREET ADDRESS**  
**3.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**4.1 TITLE**  
**4.2 NAME**  
**4.3 STREET ADDRESS**  
**4.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**5.1 TITLE**  
**5.2 NAME**  
**5.3 STREET ADDRESS**  
**5.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**6.1 TITLE**  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY-ST-ZIP**

☐ Change ☐ Addition

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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MEDARDO MARTINEZ Medardo Martinez** 1/14/99 305-5312317  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)