

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 16, 2008 8:00 am
Secretary of State

04-18-2008 90029 028 ***150.00

DOCUMENT # P98000053262		
1. Entity Name VALENTIN LOPEZ, P.A.		
Principal Place of Business 2600 DOUGLAS ROAD SUITE 811 CORAL GABLES, FL 33134 US		Mailing Address 2600 DOUGLAS ROAD SUITE 811 CORAL GABLES, FL 33134 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent LOPEZ, VALENTIN 2600 DOUGLAS ROAD SUITE 811 CORAL GABLES, FL 33134		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ, VALENTIN 2600 DOUGLAS ROAD CORAL GABLES, FL 33134	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Valentin Lopez</u>		34446030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #