

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).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**  
**Sep 14, 1999 8:00 am**  
**Secretary of State**

09-14-1999 90003 002 \*\*\*150.00

**DOCUMENT # P98000072888**

1. Corporation Name

**PREFERRED KENDALL, INC.**

Principal Place of Business  
52 SOUTH WEST 56TH ST.  
MIAMI FL 33165

Mailing Address  
9352 SOUTH WEST 56TH ST.  
MIAMI FL 33165



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**SAVE**

2a. Mailing Address

26

**SAVE**

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

City & State

28

City & State

Zip

Country

25

Zip

Country

29

30

3. Date Incorporated or Qualified

**08/20/1998**

4. FEI Number

**65-0872014**

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. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**DOMINQUEZ, MIGUEL**  
**9352 SOUTH WEST 56TH ST.**  
**MIAMI FL 33165**

10. Name and Address of New Registered Agent

81 Name

**SAVE**

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

83

84 City

**FL**

85 Zip Code

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.

NATURE **MIGUEL DOMINQUEZ**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE **9/1/99**

OFFICERS AND DIRECTORS

D ☐ DELETE  
**DOMINGUEZ, MIGUEL**  
ST ADDRESS **9352 SOUTH WEST 56TH ST.**  
T-ZIP **MIAMI FL 33165**

☐ DELETE  
ST ADDRESS  
T-ZIP

☐ DELETE  
ADDRESS  
-ZIP

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ADDRESS  
ZIP

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ADDRESS  
ZIP

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DORESS  
IP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

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 stated 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 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.

NATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9/1/99**

**(305) 598-6565**

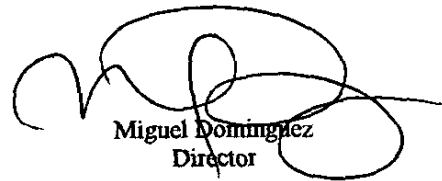
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P98000072888  
614903-90003-2

Attn: Division Of Corporations  
From: Preferred Kendall, Inc.  
Subj: Annual Report

Through a recent telephone conversation with your department i was asked to write this letter to inform you that i never received the first notice for the annual report and you department requested this letter and \$150.00 fee. Thank you in advance for your cooperation in this matter.



Miguel Dominguez  
Director