

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 22, 2000 8:00 am
Secretary of State
 08-22-2000 90220 018 ***150.00

DOCUMENT # P98000075925

1. Entity Name MARGUARITA HERNANDEZ, P.A.
Margarita Hernandez

Principal Place of Business: **11350 NW 7TH ST PLANTATION FL 33324**

Mailing Address: **11350 NW 7TH ST PLANTATION FL 33324**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 8592 W. Sunrise Blvd
 Suite, Apt. #, etc. 209
 City & State: Plantation Fla

3. Mailing Address: 8592 W. Sunrise Blvd
 Suite, Apt. #, etc. 209
 City & State: Plantation Fla

Zip: 33322 Country: U.S.A

4. FEI Number: **65-0873509**

Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HERNANDEZ, MARGUARITA
8320 W. SUNRISE BLVD. SUITE 100
PLANTATION FL 33322

7. Name and Address of New Registered Agent

Name: _____

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

City: _____ State: **FL** Zip Code: _____

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.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)

DATE: _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
SPVT	HERNANDEZ, MARGUARITA	8320 W. SUNRISE BLVD. SUITE 100	PLANTATION FL 33322	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **SIGNATURE REQUIRED**

DATE: _____ DAYTIME PHONE #: _____

CRZE034 (5/00)

Attachment
DH # PA 8000075925
00080433

P98000075925

J. Hernandez 8-17-20

Department of State
Corporation Division

Dear gentleman

Accordingly to our conversation
on 8-17 - good I'm enclosing the
uniform business report which
I only received few days
ago. I was out of town and
I also change my address
which is

Hernandez Margarita
8592 W. Sunrise Blvd

Plantation, FL 33329

I'm asking to please accept
my check for \$150.00 for my
reinstatement. Thank you
for your attention and