2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 09, 2006 8:00 am Secretary of State 02-09-2006 90040 041 ***150.00

DOCUMENT # P99000084839 1. Entity Name GUSTAVO LOPEZ, P.A.						02-09-2000 900-40 041 130.00				
Principal Place of Business		Mailin	Mailing Address			- 60013263				
16680 SW 83RD COURT			16680 SW 83RD COURT							
MIAMI, FL 3	3157		MIAMI, FL 33157							
						1 (22) (20)	(18 181) STIL BUIL BUIL		1 (8188 1)118 18	(1981 H 1881)
2. Principal Place of Business		3. Mai	3. Mailing Address							
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.			01272006	Chg-P	CR2E03	4 (11/05)	
City & State		City	City & State			4. FEI Number 65-0952	143			pplied For at Applicable
Zip	ip Country		Zip Coun		try	5. Certificate of Status Desired		\$8.75 Additional		
	6. Name and Address of Curre	nt Registers				7 Name and A	drace of New P		ee Require	°
	o. Hamo and Address of Care	iiit itegisteie	id Agent		Name	7. Name and A	ddress of New R	egistered A	Jeni	
LOPEZ, GUSTAVO										
16680 SW 83RD COURT MIAMI, FL 33157					Street Address	(P.O. Box Number	s Not Acceptable	·) 		
					City				I =:	-
				City			FL	Zip Cod		
8. The above the obligat	named entity submits this statementions of registered agent.	t for the purp	ose of changing its	registere	ed office or registe	red agent, or both,	in the State of Flo	rida. I am fa	miliar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered ag	ant and title if and	oficeble /NOTE	. Daminton	- A					
	Signature, typeo or priviled name or registered ap	Jent and title it app	wicable. (NOTE	:: Hegistere	d Agent signature require	d when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fe						.00 May Be led to Fees				
10.	OFFICERS A	ND DIRECTO	RS	11.		ADDITIONS/CI	ANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
TITLE	PSTD		☐ Delete	TITLE					☐ Change	☐ Addition
NAME	LOPEZ, GUSTAVO			NAM	- 1					
STREET ADDRESS CITY-ST-ZIP	16680 SW 83RD COURT MIAMI, FL 33157				ET ADDRESS - ST-ZIP					
TITLE	WIP (WIP), 1 E 00107		☐ Delete	TITLE	——————————————————————————————————————				Channe	CT sautos
NAME			□ Detete	NAMI				l	Change	Addition
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				CITY	-ST-ZIP					
TITLE			☐ Delete	TITLE					Change	Addition
NAME				NAM	E					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP					-ST-ZIP	·				
TITLE NAME			☐ Delete	TITLE					Change	☐ Addition
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP					-ST-ZIP					
TITLE			☐ Delete	TITLE					Change	☐ Addition
NAME				NAMI	E					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				_1	-ST-Z!P					
TITLE			☐ Defete	TITLE				١	Change	☐ Addition
NAME STREET ADDRESS				NAMI STRE	ET ADDRESS					
CITY-ST-ZIP					-ST-ZIP					
	rectify that the information supplied	with this filing	does not qualify fo			d in Chapter 119. F	ilorida Statutan II	further codifi	that the is	

I hereby certify that the information supplied with this filing does not quality 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:

GUSTAUN LOPEZ