

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 588829

1. Corporation Name

FLORIDA LEGAL CENTER P.A.
9260 SUNSET DR. Suite 107
MIAMI FL 33173

Principal Place of Business

9260 SUNSET DR
STE 107
MIAMI FL 33173

Mailing Address

9260 SUNSET DR.
STE 107
MIAMI FL 33173

800001500848

-05/30/95--01014--001

****208.75 ****208.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10-22-91

3a. Date of Last Report
5-94

2. Principal Place of Business

21 9260 SUNSET DRIVE

2a. Mailing Address

26 9260 SUNSET DRIVE

4. FEI Number

65-030-48-23

Suite, Apt. #, etc

22 107

Suite, Apt. #, etc

27 107

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

City & State

23 MIAMI, FL

City & State

28 MIAMI, FL

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip

24 33173

Country

25 USA

Zip

29 33173

Country

30 USA

7. This corporation has liability for information on Form 100 (1995) Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JORGE L. SOSA ESQ
9260 SUNSET DRIVE
STE 107
MIAMI FL 33173

10. Name and Address of New Registered Agent

81 Name SOSA JORGE L.
82 Street Address (P.O. Box Number is Not Acceptable)
9260 SUNSET DRIVE
83 STE 107
84 City MIAMI
85 Zip Code FL 33173

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 of a person named in the registered agent and fee application)

(If 11. Registered Agent, signature required after recording)

JORGE L. SOSA

4-27-95

12. OFFICERS AND DIRECTORS

12.1	NAME	12.2	STREET ADDRESS	12.3	CITY, ST, ZIP
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12.1	NAME	12.2	STREET ADDRESS	12.3	CITY, ST, ZIP
12.1	NAME	12.2	STREET ADDRESS	12.3	CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	13.2	NAME	13.3	STREET ADDRESS	13.4	CITY, ST, ZIP
13.1	TITLE	13.2	NAME	13.3	STREET ADDRESS	13.4	CITY, ST, ZIP
13.1	TITLE	13.2	NAME	13.3	STREET ADDRESS	13.4	CITY, ST, ZIP
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13.1	TITLE	13.2	NAME	13.3	STREET ADDRESS	13.4	CITY, ST, ZIP

14. I do hereby certify that the information required with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated 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 officer 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 as changed or as in agreement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE L. SOSA

4-27-95 (205) 271-9899