

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V27875

(6)

1. Corporation Name

SERGE C. ERNANDEZ, A.P., P.A.

Principal Place of Business

1680 MERIDIAN AVE
402
MIAMI BCH FL 33139
US

Mailing Address

1680 MERIDIAN AVE
402
MIAMI BCH FL 33139
US



3. Date Incorporated or Qualified
04/10/1992

3a. Date of Last Report
02/13/1995

2. Principal Place of Business

21 1680 Meridian Ave

2a. Mailing Address

26 1680 Meridian Ave

Suite, Apt. #, etc.

22 Suite 402

Suite, Apt. #, etc.

27 Suite 402

City & State

23 Miami BEACH FL

City & State

28 Miami BEACH FL

Zip

24 33139

Country

25 USA

Zip

29 33139

Country

30 USA

9. Name and Address of Current Registered Agent

ERNANDEZ, SERGE C
1680 MERIDIAN AVE #402
SUITE 11
MIAMI BCH FL 33139

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ERNANDEZ, SERGE C
STREET ADDRESS 1190 125TH STREET, #11, N.E.
CITY-ST-ZIP NORTH MIAMI FL

☐ DELETE

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CITY-ST-ZIP

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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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE: Serge Hernandez SERGE ERNANDEZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4. 17 96

Signature Printed

CR2E034 (12/95)