## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # V39788**

1. Corporation Name

JOSE L. LOPEZ, INC.

Principa	al Place of Business	Mailing Address				- 1 (BELL BILDAR (1412 ) SHILL INCHES 1819 (BILL BILL) SHIPL			
6310 NW 113 TERR HIALEAH FL 33012 US		6310 NW 113 TERR HIALEAH FL 33012 US	HIALEAH FL 33012			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE		
						Date Incorporated or Qualifed     05/29/1992			
2. Princ	cipal Place of Business	2a. Mailing Address				4. FEI Number Applied Fo	ਮ		
[		26				65-0339571 Not Applica	able		
Suite	e, Apt. #, etc.	Suite, Apt. #, etc.	<b>⊢</b> ¬ "' ' ' '			5. Certificate of Status Desired See Required	al		
City 23	& State	City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	ı ———		
Žíp	Country	Zip		Countr	у	8. This corporation owes the current year Intangible			
24	25	29	30	_	_	Personal Property Tax.			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LOPEZ, JOSE L			8	1	Name				
	6310 NW 113 TERR				Stre	Street Address (P.O. Box Number is Not Acceptable)	ess (P.O. Box Number is Not Acceptable)		
HIALEAH FL 33012				8:	3				
				84	City	FL 85 Zip Code			
offi	rsuant to the provisions of Sections 607 ce or registered agent, or both, in the S ent. I am familiar with, and accept the o	tate of Florida. Such change wa	s autho	orized by	/ the co	amed corporation submits this statement for the purpose of changing its register a corporation's board of directors. I hereby accept the appointment as registered	ed		
SIGNAT	TURE						_		
	Signature, typed or printed name of registere		OTE: Reg		ent signat	gnature required when reinstatung)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	10		
12.		S AND DIRECTORS		13.			ddition		
TILE P DELETE 1.1 TI				1.1 TITLE		C) Glange C) A	3010011		

LOPEZ, JOSE L. NAME 1.2 NAME 6310 NORTHWEST 113TH TER STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE ☐ Change ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

JRE RUSSEIRE CLOPEZ

305-556-1932

**FILED** 

May 06, 1999 8:00 am Secretary of State

05-06-1999 90077 001 \*\*\*150.00

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