

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

FILED

**Apr 25 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F81767 (8)

1. Corporation Name
J & J POTTERY, PLANT & WICKER SHOP, INC.



Principal Place of Business C/O HECTOR J. VENEGAS 4652 S.W. 72 AVENUE MIAMI FL 33155-4516	Mailing Address C/O HECTOR J. VENEGAS 4652 S.W. 72 AVENUE MIAMI FL 33155-4516
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3. Date Incorporated or Qualified 05/18/1982	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 C/O IRAIDA BORGES-VELEGAS	2a. Mailing Address 26 C/O IRAIDA BORGES-VELEGAS	4. FEI Number 59-2379161	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country
24		25	
29		30	

9. Name and Address of Current Registered Agent VENEGAS, HECTOR J. 4652 S.W. 72ND AVENUE 14032 SW 38 TERR, MIAMI, FL (HOME) MIAMI FL		10. Name and Address of New Registered Agent	
		81 Name BORGES-VELEGAS, IRAIDA	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	85 Zip Code
		FL	

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]* **President** DATE: **4-21-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BORGES-VELEGAS, IRAIDA	1.2 NAME	
STREET ADDRESS	14032 SW 38TH TERR	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 00000	1.4 CITY - ST - ZIP	
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAEZ, JANETTE	2.2 NAME	
STREET ADDRESS	113484 SW 28 STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 00000	2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *[Signature]* **President** DATE: **4/21/97** DAY/TIME PHONE #: **305-666-7803**

CR2E034 (9/96)