

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L85357

1. Corporation Name
A+J Used Appliances Corporation

Principal Place of Business Mailing Address
3111 NW 7th Ave *Same*
Miami Fla. 33127

3. Date Incorporated or Qualified *05/04/1990* 3a. Date of Last Report *04/15/95*
4. FET Number *65-0221455* (Amended Fee) ☐
Not Applicable ☐
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 *3111 NW 7th Ave* 26 *Same*
Suite, Apt #, etc. Suite, Apt #, etc.
22 City & State 27 City & State
23 *Miami Fla.* 28
24 *33127* 25 *Dade* 29 Zip 30 Country

9. Name and Address of Current Registered Agent

Inocente Rojas
3111 NW 7th Ave
Miami Fla. 33127

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 of person providing information and filing fee

Date of filing fee payment

OFFICERS AND DIRECTORS

12.	TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
		<i>P/D</i>			
		<i>Carlos Rojas</i>	<i>2880 SW 16 Street</i>	<i>Miami Fla. 33145</i>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
12	NAME				
13	STREET ADDRESS				
14	CITY, ST, ZIP				
15	TITLE				
16	NAME				
17	STREET ADDRESS				
18	CITY, ST, ZIP				
19	TITLE				
20	NAME				
21	STREET ADDRESS				
22	CITY, ST, ZIP				
23	TITLE				
24	NAME				
25	STREET ADDRESS				
26	CITY, ST, ZIP				
27	TITLE				
28	NAME				
29	STREET ADDRESS				
30	CITY, ST, ZIP				
31	TITLE				
32	NAME				
33	STREET ADDRESS				
34	CITY, ST, ZIP				
35	TITLE				
36	NAME				
37	STREET ADDRESS				
38	CITY, ST, ZIP				
39	TITLE				
40	NAME				
41	STREET ADDRESS				
42	CITY, ST, ZIP				

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***225.00

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 that 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 687, Florida Statutes, and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE: *Carlos Rojas* Period
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/96

CR2E034 (12/95)