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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State 1999 **DOCUMENT # 185357**

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90163 034 ***150.00

1. Corporation Name								
A & J USED APPLIANCES CORPORATION								
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						E FRANCISCO ARE CRUSH BARRA SERVI RUCCI COR CORRE	ale Elekt alat	IA BARKA BARAN ABR
Principal Place of Business Mailing Address							IBEL DIVIL DEBI	I BIBII GIBII IADI
3111 NW 7 AVE 3111 NW 7 AVE						i		
MIAMI FL 33127 MIAMI FL 33127								
us us						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		ĺ
a Divid Divide Address						05/03/1990 4. FEI Number		harling Far
Principal Place of Business 2a. Mailing Address							 	Applied For
26 Suite, Apt. #, etc Suite, Apt. #, etc.						65-0221455		Not Applicable Additional
22 27			u.			5. Certificate of Status Desired		Required
City & State City & State						6 Flection Compaign Financing		
23 28						6. Election Campaign Financing S5.00 May 8e Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	intry	,	8. This corporation owes the current year Int.		
24	25 29 30					Personal Property Tax. ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent				Π		10. Name and Address of New Registered	Agent	
					Name			
ROJAS, CARLOS				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
2880 SW 16TH STREET				-	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33142				83				
				84	City		85 Zip	Code
				ĺ		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								
office or r	egistered agent, or both, in the Stat im familiar with, and accept the oblig	gations of, Section 607.050	was authorizei 15, Florida Stat	utes	the corpora	mon's board of directors. Thereby accept the appoin	milent as t	egistered
SIGNATURE								
	Signature, typed or printed name of registered ag	···		1 Ager	nt signature requi	ired when reinstating) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	
TITLE	PD	☐ DETE					□ Change	
NAME	ROJAS, CARLOS		1.2 N					ĺ
STREET ADDRESS			1		ADORESS			
CITY-ST-ZIP	MIAMI FL 33142	□ DELE		ITY-S	T-ZIP		Change	Addition
TITLE							Onlange	,
NAME			2.2 N					
STREET ADDRESS	~ -	~ —			ADDRESS			
CITY-ST-ZIP		☐ DELE			ST-ZIP		Change	Addition
TITLE NAME		_ 56.6	3.1 II					
					ADDRESS		•	
STREET ADDRESS				ITY-S	1			
CITY-ST-ZIP TITLE		☐ DELE			211		☐ Change	Addition
NAME				AME				_
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-S		•		
TITLE		☐ DELE				- #-	☐ Change	Addition
NAME			5.2 N					
STREET ADDRESS			5.3 S	TREET	ADDRESS			
CITY-ST-ZIP			5.4 C	ITY-S	T-ZIP			1
TITLE		☐ DELE	TE 6.1 TI	πE			Change	Addition
NAME			6.2 N	AME			` .	
				TREET	TADDRESS			
			640	TV. 9	T. 7ID			

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 a attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR