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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000034702 (6)

J & N ACCOUNTING SERVICES, INC.

Principal	Place	Of	Business
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FILED Apr 28 1997 8:00am Secretary of State



1 tincipai i iace	o or business	walling Address					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		10345 S.W. 25TH STREI MIAMI FL 33165-2518					
					3. Date Incorporated or Qualified 04/22/1996	3a. Date of Las	t Report
2. Principal Pla	ace of Business	2a. Mailing Address			4. FELNumber	·	Applied For
21		26			65-065984	3	Not Applicable
Sulte, Apt. #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.7	5 Additional
22		27			C. Collingue of Clarks Bearing	Fee	Required
City & State		City & State			6. Election Campaign Financing		00 May Be
23 Zip	Country	28 Zip	Countr		Trust Fund Contribution		ed to Fees
24	25	·	Countr	у	8. This corporation has liability for i		r s. 199.032,
24	9. Name and Address of Curren	29 nt Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
MAD	TINEZ, JORGE L		81	Name	10. Name and Address of New Me	Bistolen Whelit	
	5 S.W. 25TH STREET						
	N FL 33165		82	Street Add	press (P.O. Box Number is Not Acceptab	le)	
MAN	K 1 E 93 103		83				
				ļ			
			84	City		FL 85 Z	ıp Code
11. Pursuant to	the provisions of Sections 607.050	02 and 607.1508 Florida Stat	tutes, the above	re-named cor	rnoration submits this statement for the n	urnose of changin	a its registered
office or re	gistered agent, or both, in the State of familiar with, and accept the oblig	of Florida, Such change wa	s authorized b	y the corpore	rporation submits this statement for the pation's board of directors. I hereby accep	t the appointment	as registered
-	The mile with the decept the oblig	COCOLINA DI COCCIONI DO COCCODI	Tionica Statute	5.			
SIGNATURE S	Signature, typed or printed name of registered age	ent and tille it appreable (N	KH: Registered Ap	ent signature requ	ared when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	ORS IN 12
TITLE	PSTD	DELETE	1.1 TOLE			Chang	e Addition
NAME	MARTINEZ, JORGE L		1.2 NAME				
STREET ADDRESS	10345 S.W. 25TH ST.		1.3 STREE	1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33165		1.4 CHY-	S1 - 71 ⁶			
TITLE		DELETE	21 THILE			Chang	e Addition
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREE	I ADDRESS			
CITY-ST-ZIP			2 4 CHY-	S1 - ZIP			
TITLE		L DELETE	3111116			☐ Chang	e 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ADORESS			
CITY-ST-ZIP	16	And the second	3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TOLE			∐ Chang	e 🔲 Addilion
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		T Attend	4.4 City - 5	ST - ZIP			
TITLE		DELETE	5.1 TITLE			Chang	e 🔲 Addition
NAME			5.2 NAME				ĺ
STREET ADDRESS			5.3 STREET				ĺ
CITY-ST-ZIP		DELETE	5.4 CITY - S	ST - ZIP			
TITLE		☐ DETEIL	61 HTLE			[] Chang	e [_] Addition
NAME STORES ADDRESS			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP	coatify that the information and	4 91. 41.1. 600	64CITY-5	ST - ZIP	1. 6 440.07/02/21 52		

I go nereby ceruly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further cortify 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.