

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY -1 AM 8:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V42788** (2)

1. Corporation Name

BROWARD & JOHNSON INTERNATIONAL, INC.

Principal Place of Business

**2952 NW 72ND AVE.
MIAMI FL 33122**

Mailing Address

**2952 NW 72ND AVE.
MIAMI FL 33122**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/08/1992	3a. Date of Last Report 02/03/1994
4. FFI Number 52-1794737	Applied For ☐ 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
6. This corporation has liability for intangible tax under S. 190.037, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State Apt. # etc.	26. State Apt. # etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**CANCHICA, JOSE J
2952 NW 72ND AVE.
MIAMI FL 33122**

10. Name and Address of New Registered Agent

81. Name ARMANDO HERNANDEZ, CPA
82. Street Address (P.O. Box Number is Not Acceptable) 520 BILTAORE WAY
83. City
84. City CORAL GABLES
85. Zip Code FL 33134

11. I, the undersigned, the undersigned of Sections 607.09(2) and 607.15(6), Florida Statutes, the above named corporation submits this statement for the purposes of changing its registered office to the 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 the provisions of Sections 607.09(2) and 607.15(6), Florida Statutes.

SUBSCRIBER

Armando Hernandez, CPA

4/28/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (Leave Blank)	
1. Name PSTD CANCHICA, JOSE J 1300 COLLINS AVE. #508 MIAMI FL 33139	2. Change ☐ Addition ☐	1. Name PSTD CANCHICA, JOSE J. 915 8th St. #107 Miami Beach, FL 33139	2. Change ☐ Addition ☐
3. Name D CANCHICA, FLOR E 1300 COLLINS AVE. #508 MIAMI FL 33139	4. Change ☐ Addition ☐	3. Name D Canchica, Flor E. 915 8th St. #107 Miami Beach, FL 33139	4. Change ☐ Addition ☐
5. Name	6. Change ☐ Addition ☐	5. Name	6. Change ☐ Addition ☐
7. Name	8. Change ☐ Addition ☐	7. Name	8. Change ☐ Addition ☐
9. Name	10. Change ☐ Addition ☐	9. Name	10. Change ☐ Addition ☐
11. Name	12. Change ☐ Addition ☐	11. Name	12. Change ☐ Addition ☐
13. Name	14. Change ☐ Addition ☐	13. Name	14. Change ☐ Addition ☐
15. Name	16. Change ☐ Addition ☐	15. Name	16. Change ☐ Addition ☐
17. Name	18. Change ☐ Addition ☐	17. Name	18. Change ☐ Addition ☐
19. Name	20. Change ☐ Addition ☐	19. Name	20. Change ☐ Addition ☐
21. Name	22. Change ☐ Addition ☐	21. Name	22. Change ☐ Addition ☐
23. Name	24. Change ☐ Addition ☐	23. Name	24. Change ☐ Addition ☐
25. Name	26. Change ☐ Addition ☐	25. Name	26. Change ☐ Addition ☐
27. Name	28. Change ☐ Addition ☐	27. Name	28. Change ☐ Addition ☐
29. Name	30. Change ☐ Addition ☐	29. Name	30. Change ☐ Addition ☐
31. Name	32. Change ☐ Addition ☐	31. Name	32. Change ☐ Addition ☐
33. Name	34. Change ☐ Addition ☐	33. Name	34. Change ☐ Addition ☐
35. Name	36. Change ☐ Addition ☐	35. Name	36. Change ☐ Addition ☐
37. Name	38. Change ☐ Addition ☐	37. Name	38. Change ☐ Addition ☐
39. Name	40. Change ☐ Addition ☐	39. Name	40. Change ☐ Addition ☐
41. Name	42. Change ☐ Addition ☐	41. Name	42. Change ☐ Addition ☐
43. Name	44. Change ☐ Addition ☐	43. Name	44. Change ☐ Addition ☐
45. Name	46. Change ☐ Addition ☐	45. Name	46. Change ☐ Addition ☐
47. Name	48. Change ☐ Addition ☐	47. Name	48. Change ☐ Addition ☐
49. Name	50. Change ☐ Addition ☐	49. Name	50. Change ☐ Addition ☐
51. Name	52. Change ☐ Addition ☐	51. Name	52. Change ☐ Addition ☐
53. Name	54. Change ☐ Addition ☐	53. Name	54. Change ☐ Addition ☐
55. Name	56. Change ☐ Addition ☐	55. Name	56. Change ☐ Addition ☐
57. Name	58. Change ☐ Addition ☐	57. Name	58. Change ☐ Addition ☐
59. Name	60. Change ☐ Addition ☐	59. Name	60. Change ☐ Addition ☐
61. Name	62. Change ☐ Addition ☐	61. Name	62. Change ☐ Addition ☐
63. Name	64. Change ☐ Addition ☐	63. Name	64. Change ☐ Addition ☐
65. Name	66. Change ☐ Addition ☐	65. Name	66. Change ☐ Addition ☐
67. Name	68. Change ☐ Addition ☐	67. Name	68. Change ☐ Addition ☐
69. Name	70. Change ☐ Addition ☐	69. Name	70. Change ☐ Addition ☐
71. Name	72. Change ☐ Addition ☐	71. Name	72. Change ☐ Addition ☐
73. Name	74. Change ☐ Addition ☐	73. Name	74. Change ☐ Addition ☐
75. Name	76. Change ☐ Addition ☐	75. Name	76. Change ☐ Addition ☐
77. Name	78. Change ☐ Addition ☐	77. Name	78. Change ☐ Addition ☐
79. Name	80. Change ☐ Addition ☐	79. Name	80. Change ☐ Addition ☐
81. Name	82. Change ☐ Addition ☐	81. Name	82. Change ☐ Addition ☐
83. Name	84. Change ☐ Addition ☐	83. Name	84. Change ☐ Addition ☐
85. Name	86. Change ☐ Addition ☐	85. Name	86. Change ☐ Addition ☐
87. Name	88. Change ☐ Addition ☐	87. Name	88. Change ☐ Addition ☐
89. Name	90. Change ☐ Addition ☐	89. Name	90. Change ☐ Addition ☐
91. Name	92. Change ☐ Addition ☐	91. Name	92. Change ☐ Addition ☐
93. Name	94. Change ☐ Addition ☐	93. Name	94. Change ☐ Addition ☐
95. Name	96. Change ☐ Addition ☐	95. Name	96. Change ☐ Addition ☐
97. Name	98. Change ☐ Addition ☐	97. Name	98. Change ☐ Addition ☐
99. Name	100. Change ☐ Addition ☐	99. Name	100. Change ☐ Addition ☐

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.01(2)(b), Florida Statutes. I further certify that the information included on this filing is not a duplicate of any information previously filed with the Department of State, 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 manager or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this filing as an officer or director.

SIGNATURE:

[Signature]

TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-28-95 (305)717-0990