## 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 # 512184

B & J SALES, INC.

Principal Place of Business

**B45 CONGRESS AVENUE** 

b a v orazo, mo.

Mailing Address

838 CONGRESS AVE WEST PALM BEACH FL 33

(3)

## FILED Feb 03 1997 8:00am Secretary of State



WEST PALM BCH FL 33406 US	WEST PALM BEACH FL 3 US	WEST PALM BEACH FL 33406-4119 US					
•				3. Date Incorporated or Qualified 09/02/1976		e of Last F 23/1996	Report
2. Principal Place of Business	2a. Mailing Address		······································	4. FEI Number	<u> </u>	A	pplied For
21 838 CONCRESS A	26 كالم			59-1716741		N	ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State City & State			6. Election Campaign Financing \$5.00 May			May Be	
23 WEST PRUM BEACH FC	28			Trust Fund Contribution	X		to Fees
Zip Country 23 UJ	Zip <b>29</b>	<u> </u>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	Current Registered Agent			10. Name and Address of New Re	glatered A	gent	
JOHNSON, CLARENCE W.		81	Name				
14134 ASTER AVE		82	Street Arin	dress (P.O. Box Number is Not Acceptab	le)		
WEST PALM BCH FL 33414		["		1, 100 (1, 10, 100) 10 (10, 100 pt.)			
		83					-
		84	City			<b>85</b> Zip	Code
				: .	FL	1	
Pursuant to the provisions of Sections office or registered agent, or both, in the agent I am familiar with, and occept the SIGNATURE    Signature Typed or printed name of registered.	a asmoon			uired when reinstating)	3-47	JI HI I I I I I I I I I I I I I I I I I	
	ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE PD	DELETE	1.1 TITLE		'		Change	Addition
NAME JOHNSON, CLARENCE	: W.	1.2 NAME					
STREET ADDRESS 14154 ASTER AVE		1.3 STREET	ADDRESS				
CITY-ST-ZIP WEST PALM BCH FL		1.4 CITY-5	ST-21P	·			
TITLE ST	☐ DELETE	2.1 TITLE				Change	Addition
NAME JOHNSON, JANICE A.		2.2 NAME	-				
STREET ADDRESS 14154 ASTER AVE		2.3 STREE	ADDRESS				
CITY-ST-ZIP WEST PALM BCH FL		2. 4 CITY -	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		,	
TITLE VS	DELETE	3.1 TITLE				Change	Additio
NAME JOHNSON, JAMES M		3.2 NAME					
STREET ADDRESS 14985 OATLAND CT		3.3 STREE	1				
CITY-ST-ZIP WELLINGTON FL	Llegitze	34 CITY -	ST-ZIP			1 1 0	4.0.000
TITLE	☐ DELETE	4.1 TITLE				Change	Additio
NAME		4 2 NAME	l l				
STREET ADDRESS			ADORESS				
CITY-ST-ZIP	DELETE	4.4 CITY - 5 1 TITLE	ST-ZIP		······	Change	Additio
TITLE		51 IIILE 52 NAME				manys	L., AQUILO
			r address				
STREET ADDRESS							
CITY-SI-ZIP TITLE	DELETE	54 CITY -: 61 TITLE	51-ZIP			Change	Additio
NAME		6.2 NAME	1			O.w.igo	1.00/10
STREET ADDRESS			T ADDRESS				
		6.4 CITY -					
CITY-ST-ZIP		■ 6.4 CHY-	51-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:

() / 3.

O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.13.97

(561) 689-0404