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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

J & B ENTERPRISES, INC.

FILED May 11 1998 8:00am Secretary of State



	_							
Principal Place of Business Mailing Address)(1 01E1) 01E1) 01E	II BIGII 1981
123 N W 6TH ST 22769 HORSESHOE WAY								
	RDALE FL 33301	BOCA RATON FL 33428-5505				DO NOT WRITE IN THIS SPACE		
UŞ					3. Date Incorporated or Qualified			
						03/21/1968		l
Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Δ,	pplied For
21 21	ace of Dosiness	26. Walling 700 603				59-1235129	 	ot Applicable
Sulte, Apt.	# etc		Suite, Apt. #, etc.					Additional
22		h	27			5. Certificate of Status Desired		equired
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip			Zip Country			B. This corporation owes or has paid the c	urrent year Ini	tangible
24	25	29	30			Personal Property Tax due June 30.	Yes [] No
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	d Agent	
BR	unñer, wilhelm			81	Name			
	789 HORSESHOE WAY		82 Street Ad		Street Addr	ress (P.O. Box Number is Not Acceptable)		
во	CA RATON FL 33433							
				83				1
				84	City		85 Zip	Code
					-	F I	L	
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								
					t signature requir	red when reinstating) DATE	ID DIDEOTOI	20 (1) 40
12.	PST OFFICERS AN	ND DIRECTORS DELETE	13.	t) £		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE				1.2 NAME			□ oundo	7.00.00
NAME	22769 HORSESHOE WAY		1.3 STREET ADDRESS		DDDCCC			1
STREET ADDRESS	BOCA RATON FL							
CITY-81-ZIP				1.4 CHY-ST-ZIP 2.1 TITLE			Change	Addition
NAME				2.2 NAME				_
STREET ADDRESS					DDRESS]
1			2. 4 City-St-ZiP					
CITY-ST-ZIP TITLE		DELETE			-11	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			3 2 N/	AME				
STREET ADDRESS					DORESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP					
TITLE	DELETE			4.1 TITLE			☐ Change	Addition
NAME			4 2 N	IAME.				
STREET ADDRESS			4.3 ST	TREET A	DDRESS			
CITY-ST-ZIP			4.4 C	TY-ST-	- ZIP			
TITLE		DELETE 5.1		TLE			☐ Change	Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 ST	IREE1 A	IDDRESS			
CITY-ST-ZIP			5.4 C	TY-SI	- ZIP			
TITLE		☐ DELETE	6.1 T)	TLE			☐ Change	Addition
NAME			6.2 N	AME				
STREET ADDRESS			6.3 ST	IREET A	ODRESS			
CITY-ST-ZIP				TY-ST-		Section 119 07/9/ii) Florida Statutes I further		

Indicated on this annual report or supplemental arrural 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 trusted 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.