

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

APPROVED
AND
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93 MAY -1 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **348542**

(2)

1. Corporation Name
JO FRED, INC.

Principal Place of Business

**777 N.W. 72ND AVE.
SUITE 2AA45
MIAMI FL 33126**

Mailing Address

**777 N.W. 72ND AVE.
SUITE 2AA45
MIAMI FL 33126**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/26/1969	3a. Date of Last Report 03/15/1994
4. FEI Number 59-1263226	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contributions ☐	\$5.00 May Be Added to Fee
8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☐ Yes ☒ No	

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

9. Name and Address of Current Registered Agent

**FREDEL, FRED
777 N.W. 72ND AVE.
MIAMI FL 33126**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 193.032 and 193.033, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office in the State of Florida. Such change was authorized by this corporation in board of directors' meeting, on the day and at the place set forth in the attached certificate of incorporation, and that my name appears in the attached certificate of incorporation.

SIGNATURE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME PD FREDEL, FRED 4000 TOWERSIDE TERR, 1601 MIAMI FL	1. NAME ☐ Change ☐ Addition
2. NAME	2. NAME ☐ Change ☐ Addition
3. NAME	3. NAME ☐ Change ☐ Addition
4. NAME	4. NAME ☐ Change ☐ Addition
5. NAME	5. NAME ☐ Change ☐ Addition
6. NAME	6. NAME ☐ Change ☐ Addition
7. NAME	7. NAME ☐ Change ☐ Addition
8. NAME	8. NAME ☐ Change ☐ Addition
9. NAME	9. NAME ☐ Change ☐ Addition
10. NAME	10. NAME ☐ Change ☐ Addition
11. NAME	11. NAME ☐ Change ☐ Addition
12. NAME	12. NAME ☐ Change ☐ Addition
13. NAME	13. NAME ☐ Change ☐ Addition
14. NAME	14. NAME ☐ Change ☐ Addition
15. NAME	15. NAME ☐ Change ☐ Addition
16. NAME	16. NAME ☐ Change ☐ Addition
17. NAME	17. NAME ☐ Change ☐ Addition
18. NAME	18. NAME ☐ Change ☐ Addition
19. NAME	19. NAME ☐ Change ☐ Addition
20. NAME	20. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct, and that I am not aware of any information that would make this information false or misleading. I understand that any false or misleading information supplied in this filing is a violation of the provisions of the Florida Statutes, and that my name appears in the attached certificate of incorporation.

SIGNATURE: *Fred Fredel*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FRED FREDEL

4/29/95 305-899-0797