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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 512067

(0)

J & S. INC. Principa: Place of Business Mailing Address 4723 TEMPLE HEIGHTS ROAD 4723 TEMPLE HEIGHTS ROAD **TAMPA FL 33617** TAMPA FL 33617-5216 3. Date Incorporated or Qualified 3a. Date of Last Report 09/02/1976 04/26/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1702960 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 2mZip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 61 Name HUSSAMY, JAMAL 4723 TEMPLE HEIGHTS RD 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33617 B3** Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Suprature, type decipion terminarie of negatiered agent and title it applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PDS DELETE 1.1 TITLE Change Addition THE HUSSAMY, JAMAL NAME 1.2 NAME 4723 TEMPLE HEIGHTS RD 1.3 STREET ADDRESS STREET ADORESS TAMPA FL City-St-78 1.4 CITY-ST-ZIP DELETE Change Addition THUE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY - ST - ZIP DELETE Change 4.1 TITLE Addition THILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CHY-\$1-202 4.4 CITY-ST-ZIP DELETE 10:8 51 TITLE Chance Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - \$1 - 7IP 5.4 CITY-ST-ZIP DELETE THILE 6.1 THLE Chance Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY - \$1 - 716 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

SIGNATURE:

ATURE AND TYPED OR PRIME OF SIGNING DEFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address

REJUMALD HUSSAMY 3-6-97 (813) 985-1582

(96/6)

FILED

Mar 11 1997 8:00am

Secretary of State