

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

FILED

Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 571889

(5)

1. Corporation Name
J & R ENGINE SERVICE, INC.

Principal Place of Business
7236 NW 25TH STREET
P.O. BOX 523037
MIAMI FL 33152

Mailing Address
7236 NW 25TH STREET
P.O. BOX 523037
MIAMI FL 33152-3037



2. Principal Place of Business
21 7236 NW 25th Street
Suite, Apt. #, etc.

2a. Mailing Address
26 P. O. Box 523037
Suite, Apt. #, etc.

City & State
23 Miami, FL

City & State
28 Miami, FL

Zip Country
24 33122 25 USA

Zip Country
29 33152 30 USA

3. Date Incorporated or Qualified
05/11/1978

3a. Date of Last Report
02/08/1996

4. FEI Number
59-1824654

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MONTEAGUDO, ANDREW
1300 W 29TH ST, APT. 34
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name
Andrew Monteagudo
82 Street Address (P.O. Box Number is Not Acceptable)
17728 SW 28 Court
83
84 City
Miramar FL 85 Zip Code
33029

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 *Andrew Monteagudo*
Signature typed or printed name of registered agent and fee if applicable

Andrew Monteagudo, Pres.
(NOTE: Registered Agent signature required when reinstating)

1/14/97
DATE

12. OFFICERS AND DIRECTORS	
TITLE	PST <input type="checkbox"/> DELETE
NAME	MONTEAGUDO, ANDREW
STREET ADDRESS	1300 W 29TH ST, APT 34
CITY - ST - ZIP	HIALEAH FL
TITLE	D <input type="checkbox"/> DELETE
NAME	MONTEAGUDO, ANDREW
STREET ADDRESS	1300 W. 29ST, APT 34
CITY - ST - ZIP	HIALEAH FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Monteagudo, Andrew
1.3 STREET ADDRESS	17728 SW 28 Court
1.4 CITY - ST - ZIP	Miramar, FL 33029
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Monteagudo, Andrew
2.3 STREET ADDRESS	17728 SW 28 Court
2.4 CITY - ST - ZIP	Miramar, FL 33029
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - 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: *Andrew Monteagudo*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew Monteagudo, Pres. (305) 592-2797

CR2034 (9/96)