

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # F00000001801
 1. Entry Name
 J & C FOX FAMILY CORP.



Principal Place of Business Mailing Address
 4220 NE 25TH AVE 4220 NE 25TH AVE
 FORT LAUDERDALE, FL 33308-5707 FORT LAUDERDALE, FL 33308-5707

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01112004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0953914 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 FOX, JOEL S
 4220 NE 25TH AVE
 FORT LAUDERDALE, FL 33308-5707

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDT FOX, JOEL S 4220 NE 25TH AVE FORT LAUDERDALE, FL 333085707
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD FOX, CAMILLE L 4220 NE 25TH AVE FORT LAUDERDALE, FL 333085707
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 01/23/04-80047-001 150.00

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Camille Fox
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 1/19/04 Daytime Phone #: 954-565-0497