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

CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

F96521

(2)

J & D	INTERNATIONAL, INC.									
Principal Place of Business Mailing Address 1323 SE 17TH STREET 1323 SE 17TH STREET SUITE 444 FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316							- I FADRILES INTO MEHIO OCIALI QUILU LIMON 			III OTOII OTOII FOOI
FI LAUDERD	ALE PL 33316	FI	LAUDERDALE FL 33	KI 6			3. Date Incorporated or Qualified 08/23/1982	3a. Date	of Last	
2. Principal Place of Business 2:			a. Mailing Address				4. FEI Number			Applied For
21			<u>.</u>				59-2217957			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc. 7				5. Certificate of Status Desired			'5 Additional e Required
City & State			City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	7	'ip	Count	у		8. This corporation has liability for			
24	25	29		30				□ No		
	9. Name and Address of Curr	ent Registe	red Agent		. T	A.L	10. Name and Address of New F	legistered /	Agent	
				8	1	Name				
SPENCER, DARRELL 12320 NW 2ND ST.						Street Addre	ess (P.O. Box Number is Not Acceptable)			
	TION FL 33325				3					
				8	4	City		FL	85	Zıp Code
familiär wit SIGNATURE	th, and accept the obligations of, So Signature typed or printed harm of registered ag-	otion 607.05 regions far	05, Florida Statutes विक्रमा (भग			rsgruture required	d of directors. Thereby accept the app	DA!E	register	
12.	OFFICERS A	ND DIRECT		13.			ADDITIONS/CHANGES TO OFF			
TITLE	PVD Spencer, Darrell		☐ DELETE	1.1700				L] Chang	e 🔲 Addition
NAME	12320 NW 2ND ST.			1.2 NAM						
STREET ADDRESS	PLANTATION FL					ADDRESS				
CITY-ST-ZIP TITLE	TEATRIONTE	· · · · · · · · · · · · · · · · · · ·	DELETE	1.4 CHY 2.1 THL		1 - 21P			7 Chang	e 🗍 Addition
NAME			_ beccie	2.2 NAM				_	1 01.12.19	. L. J Nodition
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP				2.4 CHTY						
TITLE			DELETE	3 1 TITL					Chang	e 🔲 Addition
NAME				3.2 NAM	E					
STREET ADDRESS				33 STR	εı	ADDRESS				
CHTY-ST-ZIP				3 4 CITY	- ST	T - 2 1P				
TITLE			DELETE	4 1] []	f] Chang	e 🔲 Addition
NAME				4.2 NAM	E					
STREET ADDRESS				4 3 STRE	FT A	ADDRESS				
CITY-ST-ZIP			E3 bulcu	4 4 CITY		T - Z.P			7 05	
TITLE			☐ DEFELE	5 1 TITLI				L	Chang	e 🔲 Addition
NAME				5.2 NAM		TODOL CC				
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP TITLE			DELETE	5.4 CITY 6.1 TITU		· - 21P			Chang	e 🗀 Addition
NAME				6 2 NAM		ĺ		r	ond ig	- LJ riddi,iol
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP				6.4 CITY						
	y certify that the information supplie	dueth this fl	noo is voluntarily turn	ished and do	- 5	·	r the eventution stated in Section 119	07/3/10 Flo	ddo Sto	tutos I furthor

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changes, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Light Signature And Type OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR