**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # G04680

J&G CONSTRUCTION & PAINTING CO.

HUU	cipai	Place	9 OT E	susines	S
6711	NW	24TH	TERF	RACE	
FT L	AUDI	ERDAL	E FL	33309	

Mailing Address

## Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90092 013 \*\*\*150.00



6711 NW 24TH TERRACE FT LAUDERDALE FL 33309		6711 NW 24TH TERRACE FT LAUDERDALE FL 33309					
TT CHOOLINGAL	2 / 2 00000	,			DO NOT WRITE IN TH	S SPACE	
					<ol> <li>Date Incorporated or Qualifed</li> <li>10/13/1982</li> </ol>		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			59-2223907	N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		1,000	5. Certificate of Status Desired	¥ •	Additional Required
22 City & State		City & State			-6:- Election Campaign: Financing	\$5.00	May Be
<u> </u>	-	28			Trust Fund Contribution		to Fees
23 ·	Country	Zip	Countr	,	8. This corporation owes the current year I		
			30		Personal Property Tax.	Yes	□No
24	9. Name and Address of Current		<u>')</u>		10. Name and Address of New Registere	d Agent	
	5. Name and Address of Current	Registered Agent	81	Name	10: 110:		
7AFF	. SUSAN						
ZAFF, SUSAN 6711 NW 24TH TERRACE			82	Street A	ddress (P.O. Box Number is Not Acceptable)	<u> </u>	
FT L	AUDERDALE FL 33309		83	= "			
}			84	City	F	L 85 Zip	Code
11 Dumunt	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abov	e-named o	perparation submits this statement for the nurnose	of changing it	s registered
l office or re	paistered agent or both in the State o	if Florida. Such change was auth	onzea di	r the corbor	ration's board of directors. I hereby accept the app	ointment as r	egistered
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statute:	S.			
SIGNATURE		Alox. D			quired when reinstating) DATE		—— . I
	Signature, typed or printed name of registered agent OFFICERS AND		13.	ant signature rec	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12.	T	DELETE	1.1 TITLE		, abstractor and a second	Change	
l i	TAKE ODECODY		1.2 NAME			•	_
NAME	ZAFF, GREGORY			T ADDDECO			ļ
STREET ADDRESS	6711 NW 24TH TERR.			TADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	☐ DELETE	1.4 CITY-	ST-ZIP		Change	Addition
TITLE	DPS	□ pecere	2.1 TITLE				
NAME .	ZAFF, GREGORY	ļ	2.2 NAME				ì
STREET ADDRESS	6711 NW 24TH TERR.		2.3 STRES	ET ADDRESS			
CITY-ST-ZIP_	FT LAUDERDALE, FL 00000		2. 4 CITY-				
TITLE		DELETE ==	3.1-TITLE:			Change	Addition
NAME		•	3.2 NAME				ļ
STREET ADDRESS			3.3 STREI	ET ADDRESS			ļ
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		· ·	☐ Change	Addition
NAME			4, 2 NAME	:	·		1
STREET ADDRESS			4.3 STREI	ET ADDRESS			ļ
CITY-ST-ZIP			4.4 CITY-	ST-ZiP			· ·
TITLE		[] DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS			į
CITY-ST-ZIP			5.4 CiTY-	ST-ZIP			ļ
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
			6.2 NAME			_ ,	
NAME				ET ADDRESS			
STREET ADDRESS			6.3 STRE				1
CiTY-ST-ZIP			64 CHY-	31-ZIP			

CiTY-ST-ZIP 14. 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 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 cylanged, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

1.46