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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90100 035 \*\*\*150.00

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1. Corporation Name

J & J MOTORHOLDINGS, INC.

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Principal Place of Business Mailing Address				1 (\$2121) \$411 (\$221 \$122 \$142 \$151 \$151 \$151 \$151 \$151 \$151 \$151 \$15		
2929 S. FEDERAL HIGHWAY U.S.1 2929 S. FEDERAL HIGHWAY U.S.1						
FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316				DO NOT WRITE IN THE SPACE		
						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
						09/01/1985
0 D:::=:1D	Land Division on	2a Mailing Addrage	<del></del>			4. FEI Number Applied For
¬ '	lace of Business	2a. Mailing Address				59-2623801 Not Applicable
1	# ***	26 Suite Apt # atc				\$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required
2 City & Stat		City & State				
¬ ···, ·· · · · · · · · · · · · · · · ·		<b>⊢</b> ¬ '	, a state			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
3 Zip	Country	28	Col	untry		8. This corporation owes the current year Intangible
		29	30	,		Personal Property Tax.
4 .	9. Name and Address of Curren	<del> </del>	1301	T		10. Name and Address of New Registered Agent
	3. Name and Address of Odifer	t (tegistorea Agent		81	Name	
D'ES	SPIES, KEVIN J., ESQ.					
	SE 1 AVE			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
FT LAUDERDALE FL 33316				83	<del> </del>	
				84	City	FL 85 Zip Code
office or r	egistered agent, or both, in the State on the mailiar with, and accept the obligations are stated to the colligations are stated in the colligations.	of Florida, Such change was tions of, Section 607.0505, F	authorize Iorida Sta	a by tutes	tne corpora	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered agen			d Agen	t signature requ	uired when reinstating)  DATE  ACCUTION COLLANGES TO OFFICE BS AND DIRECTORS IN 12
12.	OFFICERS AN	D DIRECTORS DELETE	13.	m c	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ☐ Change ☐ Addition
TITLE	PD AND IANET C	□ DECE IE				,
NAME	BLAIR, JANET S.			AME		
STREET ADORESS	2929 S FEDERAL HWY US1				ADDRESS	
CITY-ST-ZIP	FT. LAUDEROALE FL	☐ DELETE		ITY-S	r-zip	☐ Change ☐ Addition
TITLE			21T			
NAME			2.2 N			
STREET ADDRESS			1		ADDRESS	
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NAME			3.2 N			
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CITY-ST-ZIP				ITY-S	1-ZIP	
TITLE		☐ DELETE	6.1 T			☐ Change ☐ Addition
NAME	}		•	AME		
STREET ADDRESS					ADDRESS	
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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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Service of Spinite NAME OF SIGNING OF SIGNING

2-22.98 9545249333

Daytime Phone

CR2E034 (11/98)