PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **J31293**

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

J. PINON ENTERPRISES, INC.

Principal Place of Business Salita Automatic Salita Number Salita Numb
BAY 1-N HALEAH GAPDENS FL 33016 US 2. Principal Place of Business 21
MALEAH GARDENS FL 33016 MALEAH GARDENS FL 33016 S. Date Incorporated or Qualified O9/03/1986 S. Date Incorporated or Qualified S. Date Incorporated or Qualified S. Date Incorporated O9/03/1986 S. Date Incorporation O9/03/1986 S. Date Incorporati
US US 3. Date Incorporated or Qualified 9/303/1986 2. Principal Place of Business 2. Applied For 2/1 1651 West 3.7 St, 26 1651 West 3.7 St, 27 St,
2. Principal Place of Business 2a. Mailing Address 37. St. 592/716774 Not Applicable
1
Suite, Apt. #, etc. 27 # 4 1 0 27 # 4
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Site
41 0 ## 37 ## 41 0 ## 37 ## 41 0 ## 37 ## 41 0 ## 37 ## 3
HIALEAH, F1. 28 HIALEAH, FL. Country Country 2/p Country 2/p Country 8. This corporation was the current year Intangible Personal Property Tax. Yes This Yes This
April
24 33012 25 MIAMI DADE 29 33012 30 MIAMI DADE 29 33012 30 MIAMI DADE Personal Property Tax. Yes
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PINON, LIDYA 9921 N.W. 80TH AVENUE BAY 1-N HIALEAH GARDENS FL 33016 24 City FL 85 Zip Code 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 agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and facety the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hyped or printed name of registered agent and title if applicative. PD PINON, LIDYA 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD PINON, LIDYA 12. NAME PINON, LIDYA SISTRET ADDRESS SIGNATURE SD DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DIRECTORS 14. ACITY-ST-ZP HIALEAH GARDENS FL 33016 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DIRECTORS SO DELETE 11. TITLE SD Change Addition DELETE 21. TITLE SD Change Addition DELETE 21. TITLE SD Change Addition DELETE 21. TITLE SD Change Addition DOMINGUEZ, JUAN M SISTRET ADDRESS CITY-ST-ZP MAMI FL 33165 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition DOMINGUEZ, JUAN M SISTRET ADDRESS CITY-ST-ZP TITLE VPD DOMINGUEZ, JUAN M SISTRET ADDRESS CITY-ST-ZP ELIZABETH NJ 07206 34. CITY-ST-ZP Addition Additio
PINON, LIDYA 9921 N.W. 80TH AVENUE BAY 1-N HIALEAH GARDENS FL 33016 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, bysed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature elequined when rerestating) DAYE
PINON, LIDYA 9921 N.W. 80TH AVENUE BAY 1-N HIALEAH GARDENS FL 33016 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 City Cit
9921 N.W. 80TH AVENUE BAY 1-N HIALEAH GARDENS FL 33016 44 City FL 85 Zip Code 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 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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or privated name of registered agent agent and title if applicable. (NOTE: Registered Agent aignature required when remasting) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 11 TITLE PD DELETE 11 TITLE SID DELETE 21 TITLE SID DELETE 21 TITLE SID DELETE 22 TITLE SID DELETE 22 TITLE SID DELETE 22 TITLE SID DELETE 23 STREET ADDRESS CITY-ST-ZIP TITLE VPD DELETE 31 TITLE VPD DELETE 31 STREET ADDRESS CITY-ST-ZIP TITLE VPD DELETE 31 STREET ADDRESS CITY-ST-ZIP TITLE VPD DELETE 31 STREET ADDRESS CITY-ST-ZIP Change Addition AMME STREET ADDRESS CITY-ST-ZIP LIZABETH NJ 07206
HALEAH GARDENS FL 33016 84 City FL 85 Zip Code 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 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, agent
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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 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, the above-named 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 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 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, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligation 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation for forms agent. I am familiar with, and accept the obligation for forms agent and store in the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation for forms agent agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accept the appointment as registered agent and store of directors. I hereby accep
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE PINON, LIDYA 12 NAME PINON, LIDYA 12 NAME STREET ADDRESS POPEL PINON,
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CLIZA DETLIANI OZOGO
CITY-ST-ZIP ELIZABETH NJ 0/206
NAME 5.2 NAME

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 changed goon an attachment with an address, with all other like empowered.

☐ DELETE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

Change

☐ Addition

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90004 029 ***150.00

9 2001010 0300 12102 11020 12010 10100 2024 01021 01011 0201 01011 01011 01011 01011 01011