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95 MAY 17 AM 8:02

CORPORATION
ANNUAL REPORT
1994 -



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name
JOFRA INTERNATIONAL, INC

DOCUMENT #
J43020 (3)

Mailing Address
SEE BELOW

Principal Place of Business
SEE BELOW

800001493668
-05/18/95--01090--015
****233.75 ****233.75

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, file through incorrect information and enter correction below.

2. Mailing Address
21 **7810 N.W. 98th STREET**
Subs. Apt. #, etc.

2a. Principal Place of Business
26 **7810 N.W. 98th STREET**
Subs. Apt. #, etc.

22 **HYALEAH GARDENS, FL**

23 **HYALEAH GARDENS, FL**

24 **33016** 28 **DADE** 29 **33016** 30 **DADE**

3. Date Incorporated or Qualified
11/19/1986

3a. Date of Last Report
1/18/94

4. FEI Number
59-2768768

5. Certificate of Status Desired
EX

6. Election Campaign Financing Trust Fund Contributor
 \$5.00 May Be Added to Fees

7. Nonprofit Exempt from \$136.75 Supplemental Fee

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes
 Yes No

9. Name and Address of Current Registered Agent
ROLON, SANTOS

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
18601 TROON DRIVE
84 City **MIAMI** 85 **FL** 86 **33015**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 or 617.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Registered Agent Accepting Appointment (NOTE: Registered Agent signature required when remaining)

12. OFFICERS AND DIRECTORS			
1.1 TITLE	P	1.2 NAME	ROLON, JOSE R
1.3 STREET ADDRESS		1.4 CITY - ST - ZIP	
2.1 TITLE	S	2.2 NAME	ROLON, FRANCIS J.
2.3 STREET ADDRESS		2.4 CITY - ST - ZIP	
3.1 TITLE		3.2 NAME	
3.3 STREET ADDRESS		3.4 CITY - ST - ZIP	
4.1 TITLE		4.2 NAME	
4.3 STREET ADDRESS		4.4 CITY - ST - ZIP	
5.1 TITLE		5.2 NAME	
5.3 STREET ADDRESS		5.4 CITY - ST - ZIP	
6.1 TITLE		6.2 NAME	
6.3 STREET ADDRESS		6.4 CITY - ST - ZIP	

13. CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		1.2 NAME	
1.3 STREET ADDRESS		1.4 CITY - ST - ZIP	6858 N.W. 173 DRIVE - # 309 MIAMI, FLORIDA 33015
2.1 TITLE		2.2 NAME	ROLON, FRANCISCO J.
2.3 STREET ADDRESS		2.4 CITY - ST - ZIP	6858 N.W. 173 DRIVE - # 308 MIAMI, FLORIDA 33015
3.1 TITLE		3.2 NAME	
3.3 STREET ADDRESS		3.4 CITY - ST - ZIP	
4.1 TITLE		4.2 NAME	
4.3 STREET ADDRESS		4.4 CITY - ST - ZIP	
5.1 TITLE		5.2 NAME	
5.3 STREET ADDRESS		5.4 CITY - ST - ZIP	
6.1 TITLE		6.2 NAME	
6.3 STREET ADDRESS		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: FRANCIS J. ROLON 05/02/95 305-362-3277
Block 12 and 13 are required for all filings. Officer or Director of Corporation