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

PROSIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # K96248 (5) 1. Corporation Name					
JESSE	BODY SHOP, INC.			 	
Principal Place	of Business	Mailing Address		{	i iili oxoloquux iili oiili biili oili oiili
% JESUS RODRIGUEZ 2282 NW 22 AVE MIAMI FL 33142		% JESUS RODRIGUEZ 2282 NW 22 AVE MIAMI FL 33142		Date Incorporated or Qualified	3a. Date of Last Report
				06/19/1989	02/20/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0131925	Not Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation has liability for	
24	25	[29]	30		□ No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New F	legistered Agent
RODRIGUEZ, JESUS			82 Street Addi	ess (P.O. Box Number is Not Acceptat	ole)
2282 NW 22 AVE			83		
MIAMI F	L 33142				
			84 City		FL 85 Zip Code
or registere familiar with SIGNATURE	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec Signature, typed or printed name of registered age	orida. Such change was authorization 607,0505, Florida Statutes	ed by the corporation's boa DTE: Registered Agent signature require.		ointment as registered agent. Lam  Date
12.		ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
TITLE	PD DODDIOUEZ JEOUS E	[ ] beceig	1. 1 THLE 1.2 NAME		
NAME execut appeared	RODRIGUEZ, JESUS E. 7790 SW 26 ST		1.3 STREET ADDRESS		
STREET ADDRESS	MIAMI FL		1.4 CITY - ST - ZIP		1
CITY-SI-ZIP TITLE	SD	□ DELETE	2 1 TITLE		Change Addition
NAME	RODRIGUEZ, GLADYS		2 2 NAMÉ		
STREET ADDRESS	7790 SW 26 ST		2 3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		2.4 CITY - ST - ZIP		
THILE		☐ DELETE	3. 1 TITLE	-	☐ Change ☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			33 STHEET ADDRESS		
CITY-ST-ZIP		F3 00 00 0	3.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME .			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE		[] DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		•
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
Inte		[] DELETE	6 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-SI-ZIP		ar (a) 16 (2 gr) ( ) ( ) ( ) ( )	6 4 CITY - ST - ZIP	for the exemption stated in Section 119	07/2/fb) Florida Cratidas 16 idhar
I 1/I I do barab	w comby that the information supplied	a wan tois tano is voluntarily for	oisped and does not billality.	TOT THE EXECUTION OF STATEOUT SECTION 1 IS	ZULI DIRA, FIORIDA DIBLUTES. FIURTIEL

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)(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 cath; 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF GINING OFFICER OR DIRECTOR

U-19.96

Daytin's Phone #

CR2E034 (12/95)