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

STREET ADDRESS

FILED **PROFIT** Feb 25 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS (2)DOCUMENT # JORGE & GERRY'S, INC. Principal Place of Business Mailing Address 8370 NW 27TH AVE 8370 NW 27TH AVE MIAMI FL 33147 MIAMI FL 33147 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65<u>-0150105</u> 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name CARBAJAL, JORGE L 3140 SW 140 AVE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33175** 83 11. Pursuant to the provisions of Sections 607.05.02 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 registagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TIFLE Change 1 CARBAJAL, JORGE L NAME 1.2 NAME 1.3 STREET ADDRESS 14372 5.W.1857. 1.4 CITY-ST-ZIP MIQMI, F1 33175 3140 SW 140 AVE. STREET ADDRESS MIAMI FL CITY+ST-ZIP DELETE Change Addition TITLE 2.1 TITLE YOUMANS, GERALD L NAME 2.2 NAME 2131 N.W. 114TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL CITY - ST - ZIP 2. 4 CITY - ST- ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DE LE TE ☐ Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE Addition TITLE 5 1 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby 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 change d or on an attachment with all address

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