FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L09173** **(0)**

1. Corporation Name

J J & R OF PALM BEACH COUNTY, INC.

Principal Place of Business	Mailing Address
2318 BAY VILLAGE CT PALM BEACH GARDENS FL 33410	2318 BAY VILLAGE CT PALM BEACH GARDENS FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/14/1989	09/26/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City, State — 23 / 28
Zip — 24 / County — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-2974240 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JOHNSON, MICHAEL 2318 BAY VILLAGE CT PALM BEACH GDNS FL 33410	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section [illegible] 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. The above named entity, the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with and accept the obligations of [illegible] Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR DATA		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '[illegible]
TITLE	D	☐ Change ☐ Addition
NAME	JOHNSON, MICHAEL	
STREET ADDRESS	2318 BAY VILLAGE CT	
CITY-ST-ZIP	PALM BEACH GDNS FL	
TITLE	D	☐ Change ☐ Addition
NAME	JOHNSON, ROCIO	
STREET ADDRESS	2318 BAY VILLAGE CT	
CITY-ST-ZIP	PALM BEACH GDNS FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I/We hereby certify that the information supplied with this report is complete, accurate and current as required by law. I/We further certify that the information indicated on this annual report or supplemental annual report is true and correct 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 with changes or corrections typed or printed with an address.

SIGNATURE: Rocio Johnson / Rocio Johnson (Director) 3-28-95 (407) 694-0353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0290342 CP