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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPORT 1998	Secretary DIVISION OF CO		Secretary of State	
	MENT # L21008	(2)			
JESSY AUTO SALES INC.			A 1986/ART BYR 1108K HADII BADII BADRA 1811 BIBAT BIRAT BIRAT BIRAT BIRAT BIRAT BIRAT BIRAT KADA		
Dringing Diag	of Dusiness	Marillan Add			
Principal Plac 3634 NW 368 3624 N.W. 36	ा	Mailing Address 3634 NW 36ST 3624 NW, 36TH ST.			
MIAMI FL 331	· ·	MIAMI FL 33412		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified 10/06/1989	
	lace of Business	28. Mailing Address		4. FEI Number Applied For	
Suite, Apt	# elc	Suite, Apt. #, etc.		65-0151344 Not Applicable \$8.75 Additional	
22	w, 010.	27]		5. Certificate of Status Desired Fee Required	
City & State	e	1 1		6. Election Campaign Financing \$5.00 May Be	
23 Zip	Country		Country		
24	25	F	10	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
	City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State Country Count				
			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
			83		
Minmi FL 33147					
			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 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, Florida Statutes.					
SIGNATURE	5	Table and the second se		NI	
12.					
TITLE	Р	☐ DELETE	11 TITLE	Change Addition	
NAME	DELREY, ALEJANDRO		1.2 NAME		
STREET ADDRESS	340 WEST 55 STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	HIALEAH FL VP	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition	
NAME	RODRIQUEZ, JULIO	E bettie	22 NAME		
STREET ADDRESS	9856 NW 26 AVE		2.3 STREET ADDRESS		
CITY+ST-ZIP	MIAMI FL	_	2 4 CITY-ST-ZIP		
TITLE	S	DELETE	3 1 TITLE	Change Addition	
NAME	ODALIS, RODRIQUEZ		3 2 NAME		
STREET ADDRESS	9856 NW 26 AVE E		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	3.4. CITY-ST-ZIP	Change Addition	
NAME	RODRIQUEZ, ODALIS	ET DULL	4. 2 NAME	Ti oligiide Ti vaquillui	
STREET ADDRESS	9856 NW 26 AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		T BULL	5.4 CITY-ST-ZIP	Change Addition	
TITLE		☐ DELE1E	6.1 TITLE	Li Change Li Addition	
NAME STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
SHUCEL WORKERS			0.0 DINEEL MODREGO		

14. Thereby certify that the information supplied with this filling 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 arrural 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, or on an attainment with an address. SIGNATURE:

FILED

Mar 09 1998 8:00am