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

DOCUMENT # L72124 (5)

1. Corporation Name
JELUMA ENTERPRISES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 13 AM 11:38

Principal Place of Business	Mailing Address
C/O LUIS FERNANDEZ 12260 SW 2ND STREET PLANTATION FL 33325	C/O LUIS FERNANDEZ 12260 SW 2ND STREET PLANTATION FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/09/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 C/O LUIS FERNANDEZ
Suite, Apt. #, etc.
27 1474 W 84th St Ste B
City & State
28 Hialeah
Zip 29 33014-3363 Country 30

4. FEI Number: 65-0339922 ☐ 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

FERNANDEZ, LUIS
12260 S.W. 2ND STREET
PLANTATION FL 33325

10. Name and Address of New Registered Agent

81 Name: Luis Fernandez
82 Street Address (P.O. Box Number is Not Acceptable): 1474 W 84th St Ste B
83
84 City: Hialeah FL 85 Zip Code: 33013-3363

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: (If changing registered agent, type or print name of registered agent and title if applicable) (NOTE: Registered Agent's signature is required when name is changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, LUIS	12 NAME	
STREET ADDRESS	12260 S.W. 2ND ST.	13 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33325	14 CITY-ST-ZIP	
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, ELIA	22 NAME	
STREET ADDRESS	12260 S.W. 2ND ST.	23 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33325	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is substantially complete and does not qualify for the exemptions 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 changed, or on an attachment with an address.

SIGNATURE: Luis Tolez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-95 305-473-0376
DATE DAYTIME TELEPHONE NUMBER

0234000 CP