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 JUL 19 PM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L99843** **(9)**

1. Corporate Name
J. J.GRAVIER ENTERPRISES, INC.

500001545055
-07/25/95--01053--004
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business
717 PONCE DE LEON BLVD.
CORAL GABLES FL 33134

Mailing Address
717 PONCE DE LEON BLVD.
CORAL GABLES FL 33134

3. Date Incorporated or Qualified: **09/10/1990**
3a. Date of Last Report: **02/01/1994**

2. Principal Place of Business
21 2331 S.W. 6th St
2a. Mailing Address
26 2331 S.W. 6th St

4. FEI Number: **65-0218614** — Applied For / Not Applicable

22 Suite, Apt. # etc.
27 Suite, Apt. # etc.

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

23 City & State: Miami - Florida
28 City & State: Miami - Florida

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

24 33135 25 County: Dade
29 Zip: 33135 30 County: Dade

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

9. Name and Address of Current Registered Agent

GRAVIER, JOSE J.
2331 SW 6TH ST
MIAMI, FL 33135

10. Name and Address of New Registered Agent

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 607.0505, 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

12. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	GRAVIER, JOSE J.
STREET ADDRESS	2331 SW 6TH ST
CITY, ST, ZIP	MIAMI FL
TITLE	V
NAME	GRAVIER, ELSSY
STREET ADDRESS	2331 SW 6TH ST
CITY, ST, ZIP	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition
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☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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14. I hereby certify that the information contained herein, and in any supplemental annual report, is true and accurate and that my signature shall serve as my signature and oath to the same as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 hereof as an officer or director with an address.

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

0138843 CP