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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M24347

(0)

FILED									
May 15 1998 8:00am									
Secretary of State									

J & LC	AUTO SERVICE, INC.									
Principal Place	e of Business	Mailing Address	Mailing Address					#### 		
13273 N.W. 15 MAMI FL 3311	=	13273 N.W. 1ST LANE MIAMI FL 33182				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						12/09/1985				
2. Principal P	lace of Business	2a. Mailing Address			•	4. FEI Number Applied			_	
21		26				59-2614625	59-2614625 Not Applica			
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	Status Desired Status Desired Fee Required			
22 City & State	0	City & State								
23	-	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip				8. This corporation owes or has paid the cu		•	7	
24	25	29 30		,		Personal Property Tax due June 30. Yes				
271	9. Name and Address of Currer		1001	T		10. Name and Address of New Registered	Agent		1	
CAS	STELLANO, LEONOR			61	Name				1	
	190 MEMORIAL HWY			82	Stroot Adds	ress (P.O. Box Number is Not Acceptable)			4	
	RTH MIAMI FL 33161-3942			52	Street Addi	BSS (F.O. BOX NUMBER IS NOT HODEPIADIC)				
				B3						
				B4	City	FL	85 Z	ip Code	1	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was	authorize	d by	the corporat	poration submits this statement for the purpose clion's board of directors. I hereby accept the app	of changin	g its registered as registered	-	
SIGNATURE										
	Signature, typed or printed name of registerial agr			ನ Agen	nt signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	O DIDECT	ODE IN 12	- ſ	
12.		ID DIRE:CTORS DELETE	13. 1.1 Ti	ITI E		ADDITIONS/CHANGES TO OFFICERS AN	Chanc		- 2	
TITLE NAME	PD Castellano, Leonor						E.J. Omans	,	7	
STREET ADDRESS	13273 N.W. 1ST LANE				ADDRESS				8	
CITY-ST-ZIP	MIAMI FL 33182		E .	ITY-ST	!				Š	
TITLE	TD	_ DELETE	217		-2"		Chang	ge Addition	Շ	
NAME	CASTELLANO, JORGE L	L	2.2 N				_ `	, —		
STREET ADDRESS	13273 N.W. 1ST LANE		2.3 STREE		ADORESS					
CITY-ST-ZIP	MIAMI FL 33182			CITY-SI	- 1					
TITLE	SD	DELETE	3 1 TI				Chang	ge 🔲 Addition	1	
NAME	CASTELLANO, EDUARDO		3.2 N	AME						
STREET ADDRESS	13273 NW 1ST LANE		3.3 S	TREET A	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33182		3.4. 0	CITY - ST	T-ZIP					
TITLE		DELETE	4.1 TI	ITLE			Chang	ge 🔲 Addition		
NAME			4.21	NAME	}					
STREET ADDRESS			4.3 S	TREET A	ADDRESS					
CITY-ST-ZIP			4.4 C	ITY-ST	-ZIP					
TITLE		☐ DELETE	5.1 TI	5.1 TITLE			Chang	ge Addition		
NAME			5 2 N	5 2 NAME						
STREET ADDRESS			5.3 S	TREET A	ADDRESS					
CITY-ST-ZIP			5.4 C	ITY-ST	- ZIP				_	
TITLE		☐ DELETE	6 1 Ti	ITLE			☐ Chang	ge L Addition		
NAME			6.2 N	. 6.2 NAME						
STREET ADDRESS		İ			ADDRESS					
CITY-ST-ZIP		1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	6.4 C	ITY - ST	- ZIP	Co-5 410 02(0)(1) Fig. 12. Co-5 to 17. 12.	autif	the lefe	4	
14. I hereby of indicated	certify that the information supplied v I on this annual report or supplement	with this filing does not qualify all annual report is true and ac	tor the ex curate an	empti id tha	ion stated in it my signatu	Section 119.07(3)(i), Florida Statutes. I further care shall have the same legal effect as if made up	erury that nder oath;	the information; that I am an		

indicated on this annual report or supplemental annual report is true and accurate and man my signature shall have the same legal effect as it made under oath, that I am a 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

,他是原因,<mark>哪个有多个的</mark>是那么是<mark>对我们的,我们是那种的,不是是那些好好的,我们就是我们的,我们就是不是那么的,我们也是不是,我们也是那么是那么,也是那么什么,</mark>

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

4/22 198 Dayline Phone * 0252966