

FILE NOW: FILING FEE AFTER MAY 1 IS \$5.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Martinez
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M36805

(3)

1. Corporation Name
JOMAG, INC.

Principal Place of Business

% GLADYS M. VALDES
1315 W 72 ST
HIALEAH FL 33014

Mailing Address

% GLADYS M. VALDES
1315 W 72 ST
HIALEAH FL 33014

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip

24 25 29 30

9. Name and Address of Current Registered Agent

VALDES, GLADYS M.
1315 W 72 ST
HIALEAH FL 33014

11. Pursuant to the provisions of Sections 602.0502 and 602.0503, Florida Statutes, I am or register agent or both in the State of Florida for the purpose of changing its registered office, name, and accept the obligations of Section 602.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETED
NAME	VALDES, GLADYS M.	
STREET ADDRESS	1315 W. 72 ST.	
CITY, ST, ZIP	HIALEAH FL	
TITLE	TD	☐ DELETED
NAME	VALDES, JOSE L.	
STREET ADDRESS	1315 W. 72 ST.	
CITY, ST, ZIP	HIALEAH FL	
TITLE	SVD	☐ DELETED
NAME	GARCIA, GLADYS M.	
STREET ADDRESS	1315 W 72 ST	
CITY, ST, ZIP	HIALEAH FL	
TITLE		☐ DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14	☐ Change ☐ Addition
15	☐ Change ☐ Addition
16	☐ Change ☐ Addition
17	☐ Change ☐ Addition
18	☐ Change ☐ Addition
19	☐ Change ☐ Addition
20	☐ Change ☐ Addition
21	☐ Change ☐ Addition
22	☐ Change ☐ Addition
23	☐ Change ☐ Addition
24	☐ Change ☐ Addition
25	☐ Change ☐ Addition
26	☐ Change ☐ Addition
27	☐ Change ☐ Addition
28	☐ Change ☐ Addition
29	☐ Change ☐ Addition
30	☐ Change ☐ Addition

14. I do hereby certify that the information supplied in this report is true and correct to the best of my knowledge and belief, 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, and that the name of the corporation is as shown on the report, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with original fees.

SIGNATURE: *Gladys M. Valdes*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/25/96 (305) 558-0543
Typed Name



3. Date Incorporated or Qualified 08/14/1986
3a. Date of Last Report 06/14/1995
4. FEI Number 59-2706359
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 corporate tax under S-190.032 Florida Statutes ☐ Yes ☐ No
10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

CR2E034 (12/95)