## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

STREET ADDRESS

SIGNATURE: SIGNATURE AND THEED OR PRINTED NAME OF STONING DEFICER OR DIRECTOR

**DOCUMENT #** 1. Corporation Name

(5)

J. NATH & GIL CORPORATION

							<u> </u>		H OLDH BIOLI DHEH	(11)   110)   1 <b>53</b>	
Principal Place of Business Mailing Address  10131 NW 13TH STREET 10131 NW 13TH STREET											
10131 NW 13TH STREET PLANTATION FL 33322			PLANTATION FL 33322								
						3. Date incorporated or Qualified 02/10/1987 3a. Date of Last Report 06/13/1995			eport <b>35</b>		
****	ace of Business	2a.	. Mailing Address				4. FEI Number 12-6016665		·	Applied For Not Applicable	
Suite, Apt	#, etc.	27	Suite, Apt. #, etc.				5. Contricate of Status Desired			Additional Required	
City & State			City & State				Election Campaign Financing     Trust Fund Contribution	st Fund Contribution L Added to Fees			
<b>3</b>	Country 25	29	Zip	30 Cou	intry		This corporation has liability for Florida Statutes  Yes			199.032,	
4	9 Name and Address of Cur	11	stered Agent		T		10. Name and Address of New I	Registe	red Agent		
	5. 1101110 direct 11001000 01 001				81	Name					
	PAN HOU, PAUL NW 13TH STREET				82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)			
	ATION FL 33322				83						
					84	. ,	ration submits this statement for the part of directors. I hereby accept the app		<b>?</b> -L	ip Code	
SIGNATURE	ith, and accept the obligations of \$  Sana is bacter restance of equivers.  OFFICERS	agont ai citoro	रक्ष्मुन चर्क (१४		it Age	disqualate respon	additions/changes to of	FICERS	ATE	ORS IN 12	
12.	T P	AND DIN	DELETE		TI'LE				Change		
NAME	CHANG, PAUL		_	121	MAME						
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NAME				5.2	NAME						
STREET ADDRESS	s			5.3	STREE	EL ADDRESS					
CITY - ST - ZIP						-ST-Z.P			Chang	e [] Addition	
TITLE			☐ DELETÉ		1.01ve				crising	, D values	
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6.4 CHY-S1-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3/k), 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 cettify 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 change), or on an attachment with an address

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