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96 JAN 23 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT
.. 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M74418 (8)

1. Corporation Name

JOR - MAR CONSTRUCTION CORP.

Principal Place of Business

7542 SW 143 AVE.
MIAMI FL 33183

Mailing Address

7542 SW 143 AVE.
MIAMI FL 33183

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

g. Name and Address of Current Registered Agent

LEON, JORGE E
7542 SW 143 AVE.
MIAMI FL 33183

3. Date Incorporated or Qualified

03/30/1988

3a. Date of Last Report

02/28/1995

4. FEI Number

65-0041296

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
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

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Signature, typed name, and address of current registered agent

Signature, typed name, and address of new registered agent

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE

NAME
PST
LEON, JORGE E
7542 SW 143 AVE.
MIAMI FL 33183

12.2 STREET ADDRESS

12.3 CITY-ST-ZIP
V
MILAN-LEON, MARIA D.
7542 SW 143 AVE.
MIAMI FL

12.4 TITLE

12.5 NAME

12.6 STREET ADDRESS

12.7 CITY-ST-ZIP

12.8 TITLE

12.9 NAME

12.10 STREET ADDRESS

12.11 CITY-ST-ZIP

12.12 TITLE

12.13 NAME

12.14 STREET ADDRESS

12.15 CITY-ST-ZIP

12.16 TITLE

12.17 NAME

12.18 STREET ADDRESS

12.19 CITY-ST-ZIP

12.20 TITLE

12.21 NAME

12.22 STREET ADDRESS

12.23 CITY-ST-ZIP

12.24 TITLE

12.25 NAME

12.26 STREET ADDRESS

12.27 CITY-ST-ZIP

12.28 TITLE

12.29 NAME

12.30 STREET ADDRESS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-ST-ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-ST-ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-ST-ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-ST-ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-ST-ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY-ST-ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY-ST-ZIP

13.33 TITLE

13.34 NAME

13.35 STREET ADDRESS

13.36 CITY-ST-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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)