

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90083 007 ***150.00

DOCUMENT # P03000009811

1. Entity Name
J & A MAINTENANCE SERVICES, INC.



Principal Place of Business
**8096 NW 10TH ST
PLANTATION, FL 33322**

Mailing Address
**8096 NW 10TH ST
PLANTATION, FL 33322**

40038520



DO NOT WRITE IN THIS SPACE

03152007 No Chg-P CR2E034 (11/05)

4. FEI Number
05-0553108

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JOSEPH K. NOFIL, P.A.
3284 N. STATE RD 7
LAUDERDALE LAKES, FL 33319**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	AMARILLO, CARLOS
STREET ADDRESS	8096 NW 10TH ST
CITY - ST - ZIP	PLANTATION, FL 33322
TITLE	VP
NAME	PEREZ, ANDREA R
STREET ADDRESS	8096 NW 10TH ST
CITY - ST - ZIP	PLANTATION, FL 33322
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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

Date **3/15/07** Daytime Phone #