

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 04, 2008 8:00 am**  
**Secretary of State**

02-04-2008 90058 038 \*\*\*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

2. Principal Place of Business - No P.O. Box #  
1114 NW 79th Dr.  
Suite, Apt. #, etc.

3. Mailing Address  
1114 NW 79th Dr.  
Suite, Apt. #, etc.

City & State  
Plantation  
Zip  
33322

City & State  
Plantation,  
Zip  
33322

01302008 Chg-P CR2E034 (12/06)

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

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 date of application

(NOTE: Registered Agent's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 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	<input type="checkbox"/> Delete
NAME	AMARILLO, CARLOS	
STREET ADDRESS	8096 NW 10TH ST	
CITY - ST - ZIP	PLANTATION, FL 33322	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PEREZ, ANDREA R	
STREET ADDRESS	8096 NW 10TH ST	
CITY - ST - ZIP	PLANTATION, FL 33322	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1114 NW 79th Dr	
STREET ADDRESS	Plantation, FL 33322	
CITY - ST - ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1114 NW 79th Dr	
STREET ADDRESS	Plantation, FL 33322	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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 this 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

Daytime Phone #