FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 18 PM 8:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000002090 (8)

1. Corporation Name
JJJ ENTERPRISES, INC.

Principal Place of Business	Mailing Address
9025 COLLINS AVE. PH 3 MIAMI BEACH FL 33140	P.O. BOX 403575 MIAMI BEACH FL 33140

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
11/02/1992	08/04/1994

2. Principal Place of Business	2a. Mailing Address
21 20041 CUMBERLAND CT.	26 P.O. BOX 1412
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ESTERO, FLORIDA	City & State 28 ESTERO, FLORIDA
Zip / Country 24 33928 / 25 USA	Zip / Country 29 33928 / 30 USA

4. FEI Number **65-0367812** ☐ Applied For ☐ Not Applicable

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 intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LANDRY, PAUL 5005 COLLINS AVE. PENTHOUSE 3 MIAMI BEACH FL 33140	81 Name: LANDRY, PAUL E. 82 Street Address (P.O. Box Number is Not Acceptable): 20041 CUMBERLAND CT. 83 84 City: ESTERO FL 85 Zip Code: 33928

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	11 TITLE	PTD	☒ Change ☐ Addition
NAME	LANDRY, PAUL E.	12 NAME	LANDRY, PAUL E.	
STREET ADDRESS	5005 COLLINS AVE., PH. 3	13 STREET ADDRESS	20041 CUMBERLAND CT.	
CITY-ST-ZIP	MIAMI BCH FL	14 CITY-ST-ZIP	ESTERO, FL. 33928	
TITLE	VPSD	21 TITLE		☐ Change ☐ Addition
NAME	MCDONALD, JAMES	22 NAME		
STREET ADDRESS	4484 N. KINGTREE AVE.	23 STREET ADDRESS		
CITY-ST-ZIP	LANCASTER CA	24 CITY-ST-ZIP		
TITLE	D	31 TITLE	REMOVED	☒ Change ☐ Addition
NAME	LANDRY, JOHN B.	32 NAME	JOHN B LANDRY	
STREET ADDRESS	18124 NW 63RD CT.	33 STREET ADDRESS	WAS REMOVED AS OF OCT 22, 94	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(i), Florida Statutes. I further certify that the information indicated on the 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: _____ 4-13-95 813-498-1792
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0420308 FP