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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P92000011517

1. Corporation Name
JORGE & SON CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
2300 CORAL WAY #200 MIAMI FL 33145

Mailing Address
2300 CORAL WAY #200 MIAMI FL 33145

3. Date Incorporated or Qualified
12/14/1992
4. FEI Number
65-0390245 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 owes its current year intangible Personal Property Tax Yes No
10. Name and Address of New Registered Agent

2. Principal Place of Business

21 **2300 CORAL WAY**
Suite, Apt. #, etc.

22 **SUITE # 200**
City & State

23 **MIAMI FLORIDA**
Zip Country

24 **33145** 25 **U.S.**

2a. Mailing Address

26 **2300 CORAL WAY**
Suite, Apt. #, etc.

27 **SUITE # 200**
City & State

28 **MIAMI FLORIDA**
Zip Country

29 **33145** 30 **U.S.**

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC
2300 CORAL WAY #200 MIAMI FL 33145

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

85 Zip Code **FL**

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 for both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and his or her agent

AMADA CANTERA LOPEZ, PRES.

3/4/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	ARTILES, JORGE J	
STREET ADDRESS	2485 W FLAGLER ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ARTILES, ELENA	
STREET ADDRESS	2485 W FLAGLER ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
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11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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3/4/99

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, the receiver or trustee empowered to execute its 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, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JORGE ARTILES, President

CR2E034 (1/198)