

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000014323 (9)**

1. Corporation Name

JRF HOLDINGS, INC.



Principal Place of Business

**6555 NW 36 STR
STE 206
MIAMI FL 33166
US**

Mailing Address

**P.O. BOX 37-1309
MIAMI FL 33137
US**

3. Date Incorporated or Qualified
12/28/1992

3a. Date of Last Report
02/02/1995

2. Principal Place of Business

21 **4142 NW 132ND ST**

Suite, Apt. #, etc.

22 City & State

23 **OPA LOCKA, FL**

24 Zip **3305A**

25 Country **USA**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

65-0378343

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

**COLLETTI, JOSEPH R
3550 BISCAYNE BLVD
SUITE 610
MIAMI FL 33137**

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 607.1504, 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 must be printed below this line in capital letters and last name first)

(Signature of Registered Agent must be printed below this line in capital letters and last name first)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE ☐ DELETE
NAME **DPST FIRESTONE, JEFFREY**
STREET ADDRESS **6555 NW 36 STR, STE 206**
CITY-STATE-ZIP **MIAMI FL**

12.2 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

12.3 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

12.4 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

12.5 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

12.6 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS

13.24 CITY-STATE-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

JEFFREY FIRESTONE

1/20/96

CR2E034 (12/95)