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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

. I ROBANDON NIO PONDO NENO BONN BONN BONN DONO NINO BOND PROME DAND (DIN 1001

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000030268 (5)

JFA INCORPORATED

				·* ,*	•							
Principal Plac	e of Business	Mailing Address				.		AT LIN TATAN TITUT AT	IIII Wa ffi wa ff :		PREID 11919 0	
8104 W WATER		8104 W WATER'S AVE										
TAMPA FL 3361 US	15	TAMPA FL 33615-1849 US										
		•					Date In	corporated or	Qualified		ate of Las 30/1996	
2. Principal P	lace of Business	2a. Mailing Address				FEI Nu	mber		1		Applied For	
21		26				59-3	180710				Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Certific	ate of Status D	esired		4	Additional	
22		27								Fee	Required	
City & Stat		City & State			•		n Campaign Fi	-	_		May Be	
23	Country	Zip Country					und Contributi	· · · · · · · · · · · · · · · · · · ·	<u> </u>		d to Fees	
Zip 24]	25	29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes ☐ No						
67]	9, Name and Address of Current		301					and Address				
COT	ON, LUIS D		8	i N	lame							
	E 204 - 4021 N. ARMENIA		8:		tanal Ad	ddroon /D	O Dou	Number is No	t Assestabl			····
	PA FL 33607		6.	د ا	treet Ao	aaress (P.	.O. Box	Number is No	i Acceptati	ie)		
		ı	8:	3								
		,	84		ity			,			105 7	p Code
			6	' '	ity					FL	. 85 Z	p Code
11. Pursuant	to the provisions of Sections 607,0502 egistered agent, or both, in the State of	and 607, 1508, Florida Statule	s, the abo	ve-na	amed co	corporation	submi	ts this stateme	nt for the pu	Jrpose of	f changing	j its registered
agent. I a	m familiar with, and accept the obligation	tions of Section 607.0505, Flor	ida Statut	∌γ (π ∋8.	e corpor	JI AUGUS DO	oard or	Unectors, The	геру ассер	спе арр	JOHRINGAL	as registered
SIGNATURE												
	Signature, typod or printed name of registered agen		Registered A	genla	gnature re c	equired when r		i) ONS/CHANGES	דם מכנים	DATE	NOFAT	ODC IN 10
12.	OFFICERS AND	DELETE	1.1 TITLE			OLC.		· · · · · · · · · · · · · · · · · · ·		ERS AINL	Chang	
NAME	CARVALHO, ANDRE	L. DEFETE	1.2 NAME	-v		020	n c	JARVAL H	10		Orang	o <u>La</u> Addition
STREET ADDRESS	9705 SUNBURY COURT		1.3 STREE		ABECC	920	5 <	UNBUR	COUR	⊢.		
CITY-SY-ZIP	TAMPA FL		1.4 CITY			少 7 个	917 U) F(33/4	5		
TITLE	VPT	DELETE	2.1 TITLE					•			Chang	e 🔀 Addilio
NAME	CARVALHO, FREDERICO		2.2 NAME					CAR				
STREET ADDRESS	8205 ALMOND PLACE		2.3 STREE	I ADD	RESS	820	05 1	ALMOND	OLA	α		
CITY-ST-ZIP	TAMPA FL		2. 4 CfTY	-\$1-7	IP .		Auf,	n te	3361	5		
TITLE	VSD	☐ DELETE	3.1 THLE								Chang	e 🔲 Addition
NAME	CARVALHO, ANDRE		3.2 NAME									
STREET ADDRESS	9705 SUNBURY COURT	1	3 3 STHE	T ADD	RESS							
CITY-ST-ZIP	TAMPA FL 33615	Deleve	3.4. CITY		IP							. 1100
TITLE		☐ DELETE	4.1 TITLE								L Chang	e L Addition
NAME			4. 2 NAM		DEDG							
STREET ADDRESS			4.3 STREE									
CITY-ST-ZIP		DELETE	4.4 CITY - 5.1 TITLE		r			<u></u>		····	☐ Chang	e 🔲 Addilior
NAME		_ vicin	5.2 NAME								— Cuary	
STREET ADDRESS			5.3 STREE		DRESS							
CITY-ST-ZIP			5.4 CITY-									
TITLE		DELETE	6.1 TITLE	2, 63							Chang	e 🔲 Addition
NAME			6.2 NAME									
STREET ADDRESS	·		6.3 \$1RE	1 ADC	ORESS							
CITY-ST-ZIP			6.4 CITY	<u>\$1</u> -21	Р							
14. I do herek	by certify that the information supplied on indicated on this annual report or su	with this filing does not qualify	for the ex	emp	tion state	ated in Sec	ction 11	9.07(3)(i), Flor	ida Statules	. I furthe	r certify the	at the
l am an o	fficer or director of the corporation or t	the receiver or trustee empowe	red to exe	cute	this rep	port as rec	quired I	by Chapter 60	7, Florida St	alulos; a	and that m	y name
appears i	in Block 12 or Block 13 if changed, or	on an attactment with an addr	ess.					_			,	