## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90325 036 \*\*\*150.00

## DOCUMENT # P93000038147

J. M. CROSS TRADING CORP.

Principal Place of Business  NoDIGLAS CRIZ 1390 NW 81ST AVE 1400 NW 81ST AVE 1500 NW 81ST A					<del></del> _				// B11 ( BB) 1001
1390 NW 81ST AVE   1390 NW 81ST AVE   1390 NW 81ST AVE   1300 NW 81S	Principal Plac	e of Business	Mailing Address						
PLANTATION FL 33322-5794  PLANTATION FL 3332									
2. Principal Place of Susiness	1390 NW 81ST AVE 1390 NW 81ST AVE					DO NOT WRITE IN THIS SPACE			
Springial Place of Business   2a Mailing Address   4. Fill Number   Applied For	PLANTATION FL 33322-5794 PLANTATION FL 33322-5794								
2. Principal Place of Business						, .	•		
Suite, Apt. #, etc.		<u></u>							-lind Con
Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Site,	2. Principal P	lace of Business	2a. Mailing Address			1 "			
City & State  Ci						65-0440135			
City & State  State  Country  State  State  State  City & State  State  City & State	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			
Zip   Country   Zip   Country   Sip   Size	22								
23   26   27   28   29   30   30   30   30   30   30   30   3	City & Stat	te	City & State						
28	23					Trust Fund Contribution		Added to	) Fees
9. Name and Address of Current Registered Agent  CRUZ, DOUGLAS 1390 NW 81ST AVE PLANTATION FL 33322-5794  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 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 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, and accept the obligations of, Section 607.5505, Florida Statutes,  SIGNATURE  30	Zip ·	Country «	<u> </u>	Country			nt year.Inta		
CRUZ, DOUGLAS 1399 NW 91ST AVE PLANTATION FL 33322-5794  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 in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the operation's board of directors. I hereby accept the appointment as registered segment and remaining agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  OCRUZ, DOUGLAS 1390 NW 81ST AVE 13 STREET ADDRESS 1390 NW 81ST AVE 14 CITY-ST-ZP 14 CITY-ST-ZP 15 CHANGE 15 STREET ADDRESS 16 CITY-ST-ZP 16 CHANGE 17 ST-ZP 17 CHANGE 18 STREET ADDRESS 18 STREET	24	25	29 30		Tersonal Troporty Tax.				
CRUZ, DOUGLAS 1390 NW 81ST AVE PLANTATION FL 33322-5794  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 is 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, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE OFFICERS AND DIRECTORS 11. TITLE ORIZ, DOUGLAS 1390 NW 81ST AVE PLANTATION FL 33322-5794  TITLE ORIZ, DOUGLAS 1390 NW 81ST AVE PLANTATION FL 33322-5794  TITLE ORIZ, DOUGLAS 1390 NW 81ST AVE ORIZ, DOUGLAS 1390 NW 81ST AVE ORIZ, DOUGLAS 1390 NW 81ST AVE PLANTATION FL 33322-5794  TITLE ORIZ, DOUGLAS 1390 NW 81ST AVE ORIZ, DOUGLAS 1400 ORIZ, DOUGLAS 1500 ORIZ, DOUGLAS 15		9. Name and Address of Current	t Registered Agent			10. Name and Address of New R	egistered A	igent	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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, Typed or protect riser of registered agent and title if applicable. (NOTE Registered Agent signature required when reinsating)  DATE  12.							<del> </del>		\
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Agent. I am familiar with, and accept the obligations of, section out .0505, Floridal statutes.    Signature, typool or proted name of registated agent and life if applicable.	office or r	registered agent or both in the State (	of Florida. Such change was author	rized by	the corporatio	in's board of directors. I hereby accep	t the appoir	itment as rec	jistered
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changes, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS