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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000038731 (4)

J & J RESOURCES AND MARKETING INTERNATIONAL, INC

**FILED** Apr 18 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			1		
C/O JOHN SOMMERER & COMPANY, P.A. 1881 UNIVERSITY DR. CORAL SPRINGS FL 33071		C/O JOHN SOMMERER & COMPANY, P.A. 1881 UNIVERSITY DR. CORAL SPRINGS FL 33071-8915			
				3. Date Incorporated or Qualified 05/26/1993	3a. Date of East Report 04/09/1996
2 Principal Pla	ace of Business	2a. Mailing Address		4 EEI Number	Applied For
3300	University Drive	26 3300 Unio	ciecty Drive	65-0425574	Not Applicable
Suite, Apt.	H, etc.	Suite, Apt #, etc.			SR 75 Additional
22 2	25 (/	27 225		5. Certificate of Status Desired	Fee Required
City & State		City & State  28 Coal Sovie	is, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 <b>33</b> 0	Country 25	Zip 29 3.3045 3	Country	This corporation has liability for i     Florida Statutes	ntangible tax under s. 199.032, ,
	9. Name and Address of Current			10. Name and Address of New Re	gistered Agent
HOL	N SOMMERER & COMPANY, P.A		81 Name		
	UNIVERSITY DR.	10	82 Street Add	lress (P.O., Box Number is Not Acceptab	<b>28</b>
	AL SPRINGS FL 33071		33/17	D. University A	Vine !
OUR	LE ALIMINA LE COSTI		83	4 22-1	·
			Jan	the adoll	OF Zin Codo
			84 City	Sorian	FL 85 Zip Code 33065
11. Forsuant t	o the provisions of Sections 607.0502 egistered egent, or both, in the State	and 607,1508, Florida Statutes of Florida, Such change was au	s, the above-named cor thorized by the corpora	poration submits this / alement for the pation's board of directors. I hereby accep	
	m familiar with, and accept the obliga	tions of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE .	Signature, typed or printed name of registered agen	al and in a if small cable // // // // // // // // // // // // //	Registered Agent signature requ	(ind when rejustation)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	DELETE	1.1 TITLE	7,001110110,00111111020110 071110	Change Addition
NAME	MANLEY, JUDITH H		1,2 NAME		
1	1100 S. STATE RD. 7, #103		1.3 STREET ADDRESS		
STREET ADDRESS			B 1		
CITY-ST-ZIP	MARGATE FL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
TITLE		E otter			C onlings C received
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE		DELETE	3.1 TOLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CHY-ST-7IF		
TITLE		TT DETELE	4 1 1/TLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE ,		DELETE	5.1 TITLE	20000215 -04/22/97010	Change Addition
NAME			5.2 NAME	-04/22/97010	49039
STREET ADDRESS			5.3 STREET ADDRESS	***165.00	<del></del>
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		.~18
CITY-ST-ZIP			6.4 CITY - S1 - ZIP		u V
14. do herek	ov certify that the information supplied	d with this filing does not qualify		ed in Section 119.07(3)(i), Florida Statute	s. 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.