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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000040346 (7)

J & H STORES, INC.

FILED Mar 02 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address				LIN GRUN BUIDE I	aliai Bibib		
4400 N. ANDR	REWS AVE	112-52 ISLAND LAKES LANE BOCA RATON FL 33498							
FT. LAUDERDA	ALE FL 33309				DO NOT WRITE IN THIS SPACE				
US					3. Date Incorporated or Qualified	THIS SPACE			7
					06/08/1993				İ
2. Principal Pi	aco of Business	28. Mailing Address			4. FEI Number		App	lied For	4
21		26 4400 N.	Andre	ns Ave	65-0417130			Applicable	,
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	ı \$8	.75 Ad	ditional	٦
22		27			5. Certificate of Status Desired	F	ee Req	ulred	
City & State	2	City & Stale	0 1	. HI	6. Election Campaign Financing		5.00 M		1
23	· 	28 Ft Lande		eri	Trust Fund Contribution		dded to		4
Zip	Country	70 777246	Cour		8. This corporation owes or has paid the			~	-
24	25 9. Name and Address of Current	29 33307	30 62	Rowerd.	Personal Property Tax due June 30. 10. Name and Address of New Regist			No	4
444	· 	negistered Agent		B1 Name	10. Hame and Address of New Heyes	reted Wilett			┨
	LYNCHAK, JOHN 2-52 ISLAND LAKES LANE		L			· · · · · · · · · · · · · · · · · · ·			
	CA RATON FL 33498			Street Addr	ess (P.O. Box Number is Not Acceptable)				
60	CA NATON FL 33490		la la	83					┥
									┙
			[4	B4 City		FL 85	Zip Co	ode	Ì
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508. Florida Statut	es, the ab	ove-named corp	oration submits this statement for the purp	ose of chang	aina its	registered	-
office or re agent. I ar	egistered agent, or both, in the State i m familiar with, and accept the obliga	of Florida, Such change was tions of, Section 607,0505, Fl	authorized orida Statu	by the corporati ites.	ion's board of directors. I hereby accept the	ө appointme	int as re	gistered	
SIGNATURE	Signature, typed or priotod name of registered agen	Alox	I flooislasad	Agent signature require	ad whos (circulature)	DATE			1
12.	OFFICERS AND		13.	Agent signature require	ADDITIONS/CHANGES TO OFFICER		CTORS	IN 12	-
TITLE	D	DELETE	1.1 Titl	E	ACCITIONO/OFFINGED TO OFFICE III			Addition	
NAME	MALYNCHAK, JOHN		1.2 NAM				•		į.
STREET ADDRESS	112-52 ISLAND LAKES LANE		1.3 ŠTR	EE1 ADDRESS					H
CITY-ST-ZIP	BOCA RATON FL 33498		1.4 CIT	Y-ST-ZIP					ŀ
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NAME	MALYNCHAK, HELEN		2.2 NAM	ME .					1
STREET ADDRESS	112-52 ISLAND LAKES LANE		2.3 STH	EET ADDRESS					ł
CITY-ST-ZIP	BOCA RATON FL 33498		2. 4 CIT	Y-ST-ZIP					╛
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NAME			3.2 NAM	AE					1
STREET ADDRESS			3.3 STR	EET ADDRESS					ļ
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TITLE		□ Offilit	5 1 TITL			Ch	.ange	Addition	İ
NAME CARCET ADDRESS			5.2 NAA						١
STREET ADDRESS				EET ADDRESS					ļ
CITY-ST-ZIP TITLE		DELETE	5.4 GIT	Y-ST-ZIP		□ Ch	anne	Addition	+
NAME	•	- Deceme	6.2 NAM				·yo	- Fidelities	
• • • [EET ADDRESS					[
STREET ADDRESS CITY-ST-ZIP				1					
dd I boroby o	ertify that the information supplied wit	h this filing does not qualify f	or the ever	r-ST-ZIP nption stated in	Section 119.07(3)(i), Florida Statutes, I furt	her certify th	at the ir	nformation	\dashv
indicated officer or o Block 12 o	on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or on an alter	annual report is true and acc yer or trustee empowered to have a will an address.	curate and exocute th	that my signatur is report as requ	section 119 (75)(f), rollina statutes. If the shall have the same legal effect as if ma ired by Chapter 607, Florida Statutes; and	ide under oa I that my nan	th; that ne appe	l am an ears in	