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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Feb 18 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998

CITY-ST-ZIP

DOCUMENT # 1. Corporation Name P93000049972 (1)

J.L.G. GENERAL DISTRIBUTORS, INC.

Principal Place of Business Mailing Address						I MOINTOI HO IDIOO IMM DOINI CONII I	JOIN OBIN e il	OLD HAMMA HAMM	IBARA AIRI IBBI
510 W. 68TH	STREET	510 W. GETH STRE	510 W. 66TH STREET						
HIALEAH FL	33012	HALEAH FL 33012				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	E IN THIS	SPACE	
						07/14/1993			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		1/	Applied For
21		26	¬			65-0424430			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.						Additional
22		27	27			5. Certificate of Status Desired		Fee F	Sequired
City & State	9	. City & State	City & State			6. Election Campaign Financing		\$5.00	0 Мау Ве
23		28				Trust Fund Contribution		Added	to Fees
Zip Country		Zip				8. This corporation owes or has p	\-		~
24	25	29	30			Personal Property Tax due June			∐ No
	9. Name and Address of Cui	rrent Hegistered Agent		B1	Name	10. Name and Address of New R	gistered	Agent	
	ONZALEZ, JORGE L		ĺ	ا"	IValle				
510 W. 66TH STREET			[82	Street Add	fress (P.O. Box Number is Not Accepta	ess (P.O. Box Number is Not Acceptable)		
HI	ALEAH FL 33012		}	83	· · · · · · · · · · · · · · · · · · ·				
				8					
				84	City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 (0502 and 607 1508. Florida S	tabutes the ah	nve	-named cor	poration submits this statement for the		•	its registered
office or r	e giste red agent, or both, in the St	tate of Florida. Such change v	vas authorized	Ιbγ	the corpora	ation's board of directors. I hereby acce	pt the app	ointment a	s registered
_	m familiar with, and accept the ot	oligations of, Section 607.050;	, Florida Statu	nes					
SIGNATURE	Signature typed or printed name of registered	d agent and title if applicable	(NOTE: Begistered	Age	nt signature zegu	ired when reinstating)	DATE		
12.		AND DIRECTORS	13.		in organization response	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
TITLE	D	☐ DELETE		LE				☐ Change	Addition
NAME	Gonzalez, Jorge L		1.2 NAI	ME					
STREET ADDRESS	510 W. 66TH ST.		1.3 STF	REET	ADDRESS				
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CIT	Y-S1	F-ZIP				
TITLE		DELETE 2		2.1 TITLE		, ,		Change	☐ Addition
name			2.2 NA	ME					i
STREET ADDRESS			2.3 STF	IEET .	ADDRESS				
CITY-ST-ZIP			2. 4 CiT	Y-8	T-ZIP		2 to 1		
TITLE	<u>-</u>	☐ DELETE	3.1 TITE	LE				Change	☐ Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STP	EET .	ADDRESS				
CITY-ST-ZIP			3.4. CIT	Y - \$	T-ZIP				
TITLE		DELETË	4.1 TITL	LE				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STP	EET A	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-\$1	I-ZIP				
TITLE		☐ DELETE	5.1 TITU	.E				☐ Change	Addition
"NAME	•		5.2 NAM	ΑE					
STREET ADDRESS			5.3 STR	EET /	ADDRESS				
CITY-ST-ZIP	<u> </u>	· · · · · · · · · · · · · · · · · · ·	5.4 CIT		-ZiP				
TITLE		☐ DELETE	6.1 TITU	.E				☐ Change	☐ Addition
NAME			6.2 NAM	Æ					
STREET ADDRESS			6.3 STA	EET /	address				i

6.4 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 receive for 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.