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 # P93000056664 (4)

V & J SALES, CORP.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

L									1						
Principal Place of Business Mailing Address										1 10011001 110 10100 11111 00111		· · · ·		** •**	
255 WEST 14TH 8T. HIALEAH FL 33010				255 WEST 14TH ST. HIALEAH FL 33010					DO NOT WRITE IN THIS SPACE						
									3. Date Incorporated or Qualified						
										08/12/1993					
2. Principal Place of Business				2a. Mailing Address					4.	l h 					or
21				26					ļ	65-0430531				t Appli	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			\$8.75 Additional Fee Required			
22				27					<u> </u>					<u> </u>	
City & State				City & State					6.	Election Campaign Financing		•	5.00	•	
23				Zip Cou				,	-	Trust Fund Contribution			dded t		-
Zip 24	Country			<u> </u>			Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ■ Yes □ No					'
24]	25 29 30 9, Name and Address of Current Registered Agent					30			10. Name and Address of New Registered Agent						
RODRIGUEZ, JOHN F								Name	10.						
						1	_			50 5 10 1 1 11 14 1					
255 WEST 14TH ST.							B2	Street Addre	iss (I	P.O. Box Number is Not Accepta	ible)				
HIALEAH FL 33010							B3			· · · · · · · · · · · · · · · · · · ·					
												77.27			
							84	City			FL	85	Zip C	Sode	
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 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 registagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registored Agent signature required when refersating) DATE													registe	red	
				ND DIRECTORS 1								DIRE	CTORS IN 12		
TITLE	PD				DELETE	1.1 TIT	ΊΕ					☐ Ci	nange	☐ A	ddition
NAME	RODRIGUE					1.2 NAME									
STREET ADDRESS 255 WEST 14TH ST.				1.33			1.3 STREET ADDRESS								
CITY-ST-ZIP					1.4 CITY-ST-ZIP										
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NAME		Z, CARMEN				2.2 NA	ME								
STREET ADDRESS	255 WEST					2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	HIALEAH F	L 33 010			_	2. 4 CI	TY - 5	ST-ZIP							
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NAME						3.2 NA	ME	į.							
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CITY-ST-ZIP						3.4. CI	TY-5	ST-ZIP							1000
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NAME						4. 2 N									
STREET ADDRESS						4.3 ST	REET	ADDRESS							
CITY-ST-ZIP						4.4 CI	• • • •	1 - ZIP				<u>ام تا</u>		т.	alaisi
TITLE	I			111	NELETE	5 1 10	i F	1				☐ Ct	nande	L I A	ddition

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

FILED Feb 04 1998 8:00am Secretary of State



14. Thereby 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 changed, or on an attackment with an address. 1-22-98

Change

Addition