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 # P93000060906 (3)

J. AND J. PROPERTY INVESTMENTS, INC.

1		
Principal Place of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·
2627 W. 10TH AVE. HIALEAH FL 33010	2627 W. 10TH AVE. HIALEAH FL 33010	
		3. Dat
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI
Suite, Apt. #, etc.	Suite, Apt. #, etc.	- C

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					C CONTROL TO AND A TENTR DATE OF THE BRITE	
2627 W. 10T)	2627 W. 10TH AVE.	AVE.				
HIALEAH FL 33010		HIALEAH FL 33010				DO NOT WOITE IN THIS SOLOE
						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
•						08/26/1993
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21	a '				65-0503853 Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				CO 75	
22		27	27			5. Certificate of Status Desired Fee Regulred
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	h1	untry		8. This corporation owes or has paid the current year Intangible
24	[25]	29	30	_		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered Agent		81	Name	10, Name and Address of New Registered Agent
	RNANDEZ, AMADA				Hanne	
	27 W. 10TH AVE.				Street	et Address (P.O. Box Number is Not Acceptable)
HIA	ALEAH FL 33010			83		
• •	•			"		
				84	City	FL 85 Zip Code
11. Pursuant I	to the provisions of Sactions 607.0	502 and 607 1508 Florida Stat	utos the s	bove	n-named	ed corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was	s authorize	ed by	the corp	orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered.	agest and title if applicable (N	OII: Register	ed Age	nt signature	ure required when reinstating) DATE
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.13	ITLE		Change Addition
NAME	HERNANDEZ, AMADA		1.2 1	AME		
STREET ADDRESS	26 27 W. 10TH AVE.		1.3 9	STREET	ADDRESS	s
CITY-ST-ZIP	HIALEAH FL 33010		1.4 (HY-S	T-ZIP	
TITLE		☐ DELETE	2.1 T	ITLE		Change Addition
NAME			2.2 1	IAME		
STREET ADDRESS			2.3 9	STREET	ADDRESS	s
CITY-ST-ZIP			2. 4	CITY - S	ST-ZIP	
TITLE		DELETE	3.1 T	ITLE		Change Addition
NAME			3.2 1	IAME		
STREET ADDRESS			3.3 9	STREET	ADDRESS	S
CITY-ST-ZIP		T NECES		CITY-S	ST-7IP	
TITLE		☐ DELETE	4.11			☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	S
CITY-ST-ZIP		MEIFTE		ITY-S	T - ZIP	Channe Addition
TITLE		☐ DELETE	5.1 T			Change Addition
NAME				IAME	ADDOCAC	
STREET ADDRESS					ADDRESS	S
CITY-ST-ZIP		DELETE		HY-S	I - ZIP	Change Addition
TITLE			611			C Custaline
NAME			1	IAME	1000500	
STREET ADDRESS				TREET	ADDRESS	
CITY-ST-76P			■ 641	'UTV - S'	1 7/P	,

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 changed, or on an attachment with anyaddress.