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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P93000085185 (5)

J P C INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

7408 SOUTH DIXIE HIGHWAY

7408 SOUTH DIXIE HIGHWAY

## **FILED** Apr 27 1998 8:00am Secretary of State



W PALM BEACH FL 33405			W PALM BEACH FL 33405				DO NOT WRITE IN THIS SPACE				
							Date Incorporated or Qualified     12/01/1993				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	Applied For			
21			26	26			65-0452120	Not Applicable			
22	Suite, Apt. #, etc.		Suito, Apt. #, etc. 27 City & State 28			5. Certificate of Status Desired		\$8.75 Additional Fee Regulred			
23	City & State					···	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
24	Zip	Country 25	<b>Ζ</b> φ	30	intry	<u>.</u>	This corporation owes or has paid the curl     Personal Property Tax due June 30.	rent year Intangible ☑ Yes  ☐ No			
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
110THEOR, MATHUEL					81	Name					
					82 Street Address (P.O. Box Number is Not Acceptable)						
					63						
					84	City	FL	85 Zip Code			
1	I. Pursuant to the provis	sions of Sections 607.6	0502 and 607.1508, Fig	orida Statutes, the a	DOVE	named corpo	oration submits this statement for the purpose of	changing its registered			

	Signature, typed or printed name of registered agent and I-lin if applicable	(NOTE Registered Agent signature		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	
TITLE	D DE	ELETE 1.1 TITLE	Change C	Additio
NAME	RODRIGUEZ, JOHN F	1.2 NAME		
STREET ADDRESS	6911 MAIN ST. #204	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES FL 33014	1.4 CITY-ST-ZIP		
TITLE	D DE	LETE 21 TITLE	Change L	Additio
NAME	NORIEGA, MANUEL	2 2 NAME		
STREET ADDRESS	3322 LAKE AVENUE	2.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33405	2.4 CITY+ST-ZIP		
TETLE	☐ DE	ELETE 3.1 TITLE	☐ Change ☐	Additio
NAME		3.2 NAME		
STREET ADORESS		3.3 STREET ADORESS		
CITY-ST-ZIP		34, CITY-ST-ZIP		
TITLE	DE	LETE 4.1 TITLE	☐ Change ☐	Additio
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	□ D€	LETE 5.1 TITLE	☐ Change ☐	Additio
NAME		5 2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	□ DE	LETE 6.1 TITLE	Change L	Additio
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
חול ביו עוני		CACITY OF 710		

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 eath; 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 a address.

SIGNATURE: