FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000085581 (5)

DOCUMENT #

1. Corporation Name

J AND Y ENTERPRISES, INC.



Principal Place of Business Mailing Address						(1 60 11) 4010; 10101 641	At Bridi IAID; MAT (AB)
530 S. ATLANTIC AVENUE P.O. BOX 15110 ORMOND BEACH FL 32176 DAYTONA BEACH			FL 32115				
					3. Date incorporated or Qualified 12/10/1993	3a. Date of Las 03/28	t Report 3/1995
2. Principal Plac	2a. Mailing Address	ing Aodress		4. FET Number		Applied For	
21		26			59-3228820		Not Apolicable
Suite, Apt. #, etc.		Suite. Apt. #, etc		5. Certificate of Status Desired Sa.75 Additional Fee Required			
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees
Zip	Country	Zip	Countr	У	8. This corporation has liability for it		rs 199.032,
24	25 29		30		Florida Statutes		
	9. Name and Address of Curren	Registered Agent			10. Name and Address of New R	egistered Agent	
			8	1 Name			
DORAN, THEODORE R				2 Street Addi	Iress (P.O. Box Number is Not Acceptable)		
444 SEABREEZE BLVD.			_				
SUITE			8:	3			
DAYTONA BEACH FL 32118			8	4 City		FL 85	Zıp Code
				1	ration submits this statement for the pur		
SIGNATURE	a, and accept the obligations of Sections are protection at a protection and a contraction and acceptance and a	sentos majorkatis — C		perd Sajerahares recenso	ad war receitation ADDITIONS/CHANGES TO OFF	DATE CERS AND DIRE	CTORS IN 12
12.	OFFICERS AND	DELETE	1 1 1111	. — — — — — — — — — — — — — — — — — — —	ADDITIONS CHARGE TO CIT	☐ Char	
TITLE	pt Rodriguez, Joseph L		1.2 NAM	1			
NAME	530 S. ATLANTIC AVE.			ET ADDRESS			
STREET ADDRESS City-St-Zip	ORMOND BEACH FL			- ST - ZIP			
TITLE	VPS	DELETE		E		Char	nge Addition
NAME	RODRIGUEZ, YVONNE M		2 2 NAM	Ĺ			
STREET ADDRESS	530 S. ATLANTIC AVE.		2 3 STR	ET ADDRESS			
City-ST-ZIP	ORMOND BEACH FL			- \$1 - ZIP			-
TITLE		☐ DELETE		E		☐ Chae	nge 🗌 Addition
NAME			3.2 NAM	ł			
STREET ADDRESS			3 3 STA	EET ADDRESS			
CITY-ST-ZIP		FM No. Fre		34 CHY-SI-Zii ²		□ Cha	nge Addition
PILE		DELFTE	4 1 ft/,				iêc 🔲 wholeel
NAME			4 2 NAM	1			
STREET ADDRESS				EET ADDRESS			
CITY - ST - ZIP		DELETE	4.4 CHY 5.1 TH	-ST-ZIP		☐ Cha	nge 🔲 Addition
TITLE			5 2 NAM	i			
NAME OTREST ADDRESS				EET ADDRESS			
STREET ADDRESS				-ST ZIP			
CITY-ST-ZIP TITLE		☐ DELETE		.F		Cha	nge Addition
NAME			6.2 NAM				
				EET ADDRESS			
STREET ADDRESS				7-ST-ZIP			
CITY-ST-ZIP 14. I do hereb	v certify that the information supplied	with this filing is voluntarily fu	irnished and d	oes not qualify	for the exemption stated in Section 119	.07(3)(к), Florida S	tatutes. I further

octify that the information indicated on this annual reject is supplemental annual reject 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 an address.

SIGNATURE: KASAA

A ROJULIUM JOSEPH L. RUDIIGUEZ