

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Martinez
Secretary of State
Office of the Secretary of State

APPROVED
AND
FILED

MAY 10 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000022127 (2)**

1. Corporation Name

JORDAN ENTERPRISES OF TAMPA, INC.

(DO NOT WRITE IN THIS SPACE)

3. Date of Filing (Month/Day/Year) 03/15/1994	3a. Date of Last Report
4. FFI Number 59-3233986	Applied For Not Applicable
5. Certificate of Status (Issued) ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This corporation has failed to inform the Secretary of State of its financial status ☐ Yes ☐ No	

2. Principal Office of the Corporation	2a. Mailing Address
21. State: FL	26. State: FL
22. City: Tampa	27. City: Tampa
23. Zip: 33614	28. Zip: 33614
24. Country: USA	29. Country: USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GLYMPH, DIANNA 3615 W. WATERS AVENUE, STE. 125 TAMPA FL 33614	81. Name: 82. Street Address (P.O. Box Number is Not Applicable): 83. City: 84. Zip:

11. Pursuant to the provisions of Sections 609, 610, and 611 of the Florida Statutes, the officer named hereon subscribes this statement for the purpose of changing its registered office or registered agent as set forth in the above. If the change was authorized by the corporation's board of directors, I hereby accept this appointment as registered agent. I am a resident of the State of Florida.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME: D GLYMPH, DIANNA STREET ADDRESS: 13311 GOLF CREST CIRCLE CITY: TAMPA STATE: FL ZIP: 33624	1. NAME: P 2. NAME: VP Joseph S. Glymph 3. STREET ADDRESS: 13311 Golf Crest Cir 4. CITY: Tampa, FL 5. NAME: Matthew J. Glymph 6. STREET ADDRESS: 13311 Golf Crest Cir 7. CITY: Tampa, FL 8. NAME: 9. STREET ADDRESS: 10. CITY: 11. NAME: 12. STREET ADDRESS: 13. CITY: 14. NAME: 15. STREET ADDRESS: 16. CITY: 17. NAME: 18. STREET ADDRESS: 19. CITY: 20. NAME: 21. STREET ADDRESS: 22. CITY: 23. NAME: 24. STREET ADDRESS: 25. CITY: 26. NAME: 27. STREET ADDRESS: 28. CITY: 29. NAME: 30. STREET ADDRESS: 31. CITY: 32. NAME: 33. STREET ADDRESS: 34. CITY: 35. NAME: 36. STREET ADDRESS: 37. CITY: 38. NAME: 39. STREET ADDRESS: 40. CITY: 41. NAME: 42. STREET ADDRESS: 43. CITY: 44. NAME: 45. STREET ADDRESS: 46. CITY: 47. NAME: 48. STREET ADDRESS: 49. CITY: 50. NAME: 51. STREET ADDRESS: 52. CITY: 53. NAME: 54. STREET ADDRESS: 55. CITY: 56. NAME: 57. STREET ADDRESS: 58. CITY: 59. NAME: 60. STREET ADDRESS: 61. 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FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FLORIDA NATIONAL
ANNUAL REPORT
1995



OFFICE OF THE SECRETARY OF STATE
JENNIFER M. MATHIAS
Secretary of State
1000 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
JAN 10 1996

FILED: 10:25

DOCUMENT # P94000023140 (4)

D & M EXPORT, INC.

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

1. Principal Office Address 9821 SW 155 AVE MIAMI FL 33196		2a. Mailing Address 9821 SW 155 AVE MIAMI FL 33196		3. Date of Report (Month/Day/Year) 03/24/1994		3a. Date of Last Report	
2. Principal Office City, State, and Zip 21 9821 SW 155 AVE State Apt. # 10 22 23 Miami FL 24 33196 25 USA 26 27 28 29 30		2a. Mailing Address City, State, and Zip 26 27 28 29 30		4. Filing Number 65-0478681		Applied For Not Applicable	
9. Name and Address of Current Registered Agent REYES, LUISA F 9821 SW 155 AVE MIAMI FL 33196				10. Name and Address of New Registered Agent 81 Name 82 Street Address, P.O. Box Number or Not Applicable 83 84 City, State, and Zip FL 85			
11. Pursuant to the provisions of Sections 207.01(1)(a) and 207.01(2)(b), Florida Statutes, the above named corporation submits this statement for the purpose of, through its registered office or registered agent, reporting to the State of Florida. Said reporting was authorized by the corporation's board of directors or board of managers, except the appointment of a registered agent. Last furnished with and except the statement of Section 207.01(1)(a), Florida Statutes.							
SIGNATURE							
12. OFFICERS AND EMPLOYEES				13. ADDITIONAL CHANGES TO OFFICERS AND EMPLOYEES			
NAME PSD REYES, LUISA F 9821 SW 155 AVE MIAMI FL 33196				NAME 14. NAME 15. STREET ADDRESS 16. CITY, STATE, AND ZIP			
NAME 17. NAME 18. STREET ADDRESS 19. CITY, STATE, AND ZIP				NAME 20. NAME 21. STREET ADDRESS 22. CITY, STATE, AND ZIP			
NAME 23. NAME 24. STREET ADDRESS 25. CITY, STATE, AND ZIP				NAME 26. NAME 27. STREET ADDRESS 28. CITY, STATE, AND ZIP			
NAME 29. NAME 30. STREET ADDRESS 31. CITY, STATE, AND ZIP				NAME 32. NAME 33. STREET ADDRESS 34. CITY, STATE, AND ZIP			
NAME 35. NAME 36. STREET ADDRESS 37. CITY, STATE, AND ZIP				NAME 38. NAME 39. STREET ADDRESS 40. CITY, STATE, AND ZIP			
NAME 41. NAME 42. STREET ADDRESS 43. CITY, STATE, AND ZIP				NAME 44. NAME 45. STREET ADDRESS 46. CITY, STATE, AND ZIP			
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NAME 65. NAME 66. STREET ADDRESS 67. CITY, STATE, AND ZIP				NAME 68. NAME 69. STREET ADDRESS 70. CITY, STATE, AND ZIP			
NAME 71. NAME 72. STREET ADDRESS 73. CITY, STATE, AND ZIP				NAME 74. NAME 75. STREET ADDRESS 76. CITY, STATE, AND ZIP			
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NAME 83. NAME 84. STREET ADDRESS 85. CITY, STATE, AND ZIP				NAME 86. NAME 87. STREET ADDRESS 88. CITY, STATE, AND ZIP			
NAME 89. NAME 90. STREET ADDRESS 91. CITY, STATE, AND ZIP				NAME 92. NAME 93. STREET ADDRESS 94. CITY, STATE, AND ZIP			
NAME 95. NAME 96. STREET ADDRESS 97. CITY, STATE, AND ZIP				NAME 98. NAME 99. STREET ADDRESS 100. CITY, STATE, AND ZIP			

SIGNATURE:

Luisa Ferrnandez Reyes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/95 305 3832472