

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY - 1 AM 10:41

DOCUMENT # **P94000040259 (1)**

1. Corporation Name
J.L. MIGOAL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**9010 S.W. 11TH STREET
MIAMI FL 33174**

Mailing Address
**9010 S.W. 11TH STREET
MIAMI FL 33174**

DO NOT WRITE IN THIS SPACE

9. Date Incorporated or Qualified **05/27/1994** 9a. Date of Last Report

2. Principal Place of Business		2a. Mailing Address	
21	26		
Suite, Apt # etc		Suite, Apt # etc	
22	27		
City & State		City & State	
23	28		
Zip	Country	Zip	Country
24	25	29	30

4. FEI Number 65-0517034	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 118(1)(a), Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MIRET, JORGE
9010 S.W. 11TH STREET
MIAMI FL 33174**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. 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 office or 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 registered agent. I am familiar with and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE: *[Signature]* 4-26-95

12. OFFICERS AND DIRECTORS	
TITLE	D PRESIDENT
NAME	MIRET, JORGE
STREET ADDRESS	9010 S.W. 11TH STREET
CITY, ST, ZIP	MIAMI FL 33174
TITLE	D SECRETARY
NAME	MIRET, LUISA C
STREET ADDRESS	9010 S.W. 11TH STREET
CITY, ST, ZIP	MIAMI FL 33174
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 111.077(1)(b), Florida Statutes. I further certify that the information included 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 (except, or on an attachment with an address.

SIGNATURE: *[Signature]* 4-26-95 305 559-3686