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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000040259 (1)

J.L. MIGOAL, INC.

| Principal Place of Business | | Mailing Address | | | r Labisabı isa sanın kritis danis danir başın darin dibin daşın bibas dibat (Bat | | | |
|-----------------------------|---|-------------------------------|---------------------|---|---|-----------------|-------------|-------------------|
| 9010 S.W. 11TH STREET | | 9010 S.W. 11TH STREET | | | | | | |
| MIAMI FL 331 | 74 | MIAMI FL 33174-3184 | | | | | | |
| | | | | | 3. Date Incorporated or Qualified | d 3a. Da | te of Last | Report |
| | | | | | 05/27/1994 | | 19/1996 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | 17/ | Applied For |
| 21 | | 26 | | | 65-0517034 | | | Not Applicable |
| Suite, Apt. #, etc. | | Suite Apt. #. etc. | | 5. Certificate of Status Desired | | • | Additional | |
| 22 | | 27 | | · | ST SELLINGTICS OF STATES AND STATES | | Fee F | Required |
| City & State | | City & State | | 6. Election Campaign Financing | | | | |
| 7.5 | Country | 28 | Country | | Trust Fund Contribution | | | to Fees |
| Zφ | } | | ├ ─ ` | 8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No | | | s. 199.032, | |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | [30] | | 10. Name and Address of New Registered Agent | | | |
| MIR | ET, JORGE | it inegiotores rigetit | 81 | Name | IQ. Harris Silv Accress of How I | rogistereu i | Acut | |
| | O S.W. 11TH STREET | | | | | | | |
| | MI FL 33174 | 82 Street Add | | ddress (P.O. Box Number is Not Acceptable) | | | | |
| l link | MI I E 00174 | | 83 | | | | | |
| ł | | | | | | | | |
| | | | 64 | City | | FL | 85 Zip | Code |
| 11. Pursuant | to the provisions of Sections 607 050 |)2 and 607.1508. Florida Stat | tutes, the above | e-named cor | rooration submits this statement for the | nurnose of | changing | its registered |
| office or r | egistered agent, or both, in the State in familiar with and accept the oblig | of Horida, Such change wa | s authorized by | the corpora | rporation submits this statement for the ation's board of directors. I hereby acc | ept the app | ointment a | s registered |
| | B. Somus L | ances or, occupingov.0303. | | . حدوق | \ /~ | 1.6 | 0- | |
| SIGNATURE | Signature type-fire ports over an incline estimated agr | | OTE: Registered Age | ent signature requ | ured when reinstating) | 1-5- | 77_ | |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OF | ICERS AND | DIRECTO | RS IN 12 |
| TITLE | DP | ☐ DELETE | 1 1 TITLE | | | | Change | Addition |
| NAME | MIRET, JORGE | | 1 2 NAME | | | | | |
| STREET ADDRESS | 9010 S.W. 11TH STREET | | 1 3 STREET | ADDRESS | | | | |
| CITY - ST - ZIP | MIAMI FL | | 1.4 CITY - S | T-ZIP | | | | |
| TITLE | | | 2 1 TATLE | | | | Change | ☐ Addition |
| NAME | MIRET, LUISA C | | 2.2 NAME | | | | | |
| STREET ADDRESS | 9010 S.W. 11TH STREET | | 2 3 STREET | ADDRESS | | | | i |
| City - \$1 - ZIP | MIAMI FL | **** | 2 4 CITY - | ST - ZIP | | | | |
| THILE | | | 3.1 TITLE | | | | ☐ Change | L Add:tion |
| NAME | MIRET, GUSTAVO R | | 3.2 NAME | | | | | |
| STREET ADDRESS | 9010 SW 11TH ST | | 3 3 STREET | ADDRESS | | | | |
| CITY-SI-ZiP | MIAMI FL | 551575 | 3 4, CITY- | ST - ZIP | | | | |
| THE | * | ☐ DELETE | 4 1 TITLE | | | | Change | ☐ Addition |
| NAME | | | 4 2 NAME | | | | | |
| STREET ADDRESS | | | 4 3 STREET | | | | | |
| CITY SI-7iP | | DELFTE | 4.4 C/TY - S | T - ZIP | | | Character | 1,422. |
| TULE | | LI BUTE | 51 TITLE | | | | ∐ Change | Addition Addition |
| NAME CERTAL ADDROVED | | | 52 NAME | Innocci | | | | |
| STREET ADDRESS | | | 5 3 STREET | | | | | |
| CITY - \$1 - ZIP | | DELETE | 5.4 City - S | T-ZIP | | | Chance | |
| FiTLE | | L") httit | 61 TITLE | | | | Change | Addition Addition |
| NAME COMMENTATION | | | 6.2 NAME | IDDECC | | | | |
| STREET ADDRESS | | | 6 3 STREET | | | | | |
| CITY - ST - ZIP | | | 6.4 CITY - S | T - ZIP | | | | |

14. I do 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 an address.

SIGNATURE

CONTRINE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIRET PRESYDENT 1-5-97

305-559-3636

FILED

Jan 14 1997 8:00am

Secretary of State