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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000050632 (6)

FILED Feb 18 1998 8:00am Secretary of State

J.I.D. I	PRODUCTS INC.	, , , , , , , , , , , , , , , , , , ,						
Principal Plac	e of Business	Mailing Address			-	JEDIL BOLDI USUL I	TENIE BAIRE I	
135 W. 58TH TERRACE 135 W. 58TH TERRACE HIALEAH FL 33012 HIALEAH FL 33012					DO NOT WOIT	E INI TURO OE	MOE	
					DO NOT WRITE 3. Date Incorporated or Qualified	E IN THIS SP	ACE	
					07/08/1994			
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number		TA	pplied For
21 26		26			65-0505330		→	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State		City & State			6. Election Campaign Financing			` -
23		28		Trust Fund Contribution		•	May Be to Fees	
Zip	Country Zip		Country		8. This corporation owes or has paid the current year Intangible			
24	25 29 30				Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curr	ent Registered Agent		1.	10. Name and Address of New Re	gistered Ag	ent	
DAVALOS, JOSE M			81	Name				
135 WEST 58TH TERRACE			82	Street Addre	ss (P.O. Box Number is Not Accepta	ble)	-	
HIALEAH FL 33012			83					
			63					
1			84	City		FL	85 Zip	Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid 			s the above-r	named corno	ration submits this statement for the	PL Duroce of oi	banding it	te registered
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was au	uthorized by the	he corporatio	n's board of directors. I hereby acce	pt the appoir	itment as	registered
	m ismalar with, and accept the obt	igations of, Section 607.0505, Flor	rida Statutes.					
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE:	Registered Agent	signature required	when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND D	RECTOR	RS IN 12
TITLE	P	☐ DELE te	1.1 TITLE				Change	Addition
NAME	DAVALOS, JOSE M		1.2 NAME					
STREET ADDRESS	135 W 58 TERRACE		1.3 STREET ADDRESS		• .			
CHY-ST-ZIP TITLE	HIALEAH FL 33012 TS	DELETE	1.4 CITY - ST - ZIP			<u> </u>	1 05	T Address
NAME	DAVALOS, IRMA	U UELETE	2.1 TITLE			L.	Change	☐ Addition
STREET ADDRESS	135 W 58 TERR		2.2 NAME 2.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33012		2.3 STREET AU 2.4 CITY - ST -					
TITLE	TINCENTTE GOOTE	☐ DELETE	3.1 TITLE	ZIP			Change	Addition
NAME		_	32 NAME			_		
STREET ADDRESS			3.3 STREET AD	DRESS				
CITY-ST-ZIP			3.4. CITY-ST-					
TITLE		☐ DELE te	4.1 TITLE	-			Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET AD	DRESS				
CITY-ST-ZIP			4.4 CITY-ST-Z	!IP				
TITLE		DELETÉ	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADI	DRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADI					1
CITY-ST-ZIP		<u> </u>	6.4 CITY - ST - Z	ne [

I 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 or an attachment with an address.