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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000059462 (9)

H & J TRANSFER CORP.

| Principal Place of Business Mailing Address | | | | | | 80111 80111 80101 81110 10111 81810 81118 1101 1001 |
|---|--|--|-------------|---|--|---|
| 6280 N.W. 3RD STREET Miam# Fl 33126 | | 6280 N.W. 3RD STREET Miami FL 33126 | | | | |
| | | | | | Date Incorporated or Qualified 08/10/1994 | 04/28/1995 |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 65-0518636 | Not Applicable |
| Suite, Apt. # | l, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | ¬ ´ | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Zip Coun | | 8. This corporation has liability for | printangible tax under s. 199.032, |
| 24 | 25 | 29 | 0 | | | es 🔲 No |
| | 9. Name and Address of Curren | Registered Agent | | | 10. Name and Address of New | Registered Agent |
| | | | - | 81 Name | Э | |
| PEREZ, HUMBERTO | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| 6280 N.W. 3RD STREET | | | | | | · |
| MIAMI FL 33126 | | | [| 83 | | |
| | | | 1 | 84 City | | FL 85 Zip Code |
| or register | o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti | fa. Such change was authorized | the abov | ve-named or orporation's | corporation submits this statement for the p s board of directors. I hereby accept the ap | purpose of changing its registered office |
| SIGNATURE | Stonature typed or printed name of registered agent | and title if anothrable (NOTE: | Redistant A | Agent signature | a required when reinstating) | DATE |
| 12. | OFFICERS AND DIRECTORS | | 13. | | | FFICERS AND DIRECTORS IN 12 |
| THILE | PTD | DELETE | 1. 1 TITLE | | | ☐ Change ☐ Addition |
| NAME | ZARBATANY, JEFF | - | 1.2 NA | ME | 1 | |
| STREET ADDRESS | 6280 N.W. 3RD STREET | | 1.3 STE | reet address | 3 | |
| CITY-ST-ZIP | MIAMI FL 33126 | | 1.4 CiT | Y-ST-ZIP | | |
| 311 31-21 | 1111 4111 1 2 40 124 | FT 65 FY | | | · | Change Cl Addition |

VSD ☐ DEFELE PEREZ, HUMBERTO NAME 6280 N.W. 3RD STREET 23 STREET ADDRESS STREET ADDRESS **MIAMI FL 33126** 24 CITY-ST-ZIP CHTY-ST-ZIP ☐ Change ☐ Addition 🔲 DELETE 3. 1 TITLE TITLE NAME 3 2 NAME STREET ADDRESS 33 STREET ADDRESS 3 4 CITY - ST - ZIP CHY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE 42 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY - ST - ZIP Change DELETE ☐ Addition 5 1 TITLE TITLE 5 2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHTY-ST-ZIP Change DELETE 6 1 TITLE Addition TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 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 119.07(3)(k). 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 Achanolid, or on an attachment with an address.

SIGNATURE



308.363.61