FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF ST

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000066108 (9)

JUSYL, INC.

00012									
Principal Plac	e of Business	Mailing Address		·		II OOIFO GIIIO	HIID HIII		11
5251 SW 7TH		5251 SW 7TH STREET							
MIAMI FL 33134 MIAMI FL 33134									
US		US			DO NOT WRITE	IN THIS S	PACE		
					3. Date Incorporated or Qualified				
			··· ··· ·· ···		09/08/1994				
2. Principal Place of Business 2a. Mailing Address							Applied Fo		
26					<u> </u>		Not Applic		
Stitle, Apr. #, etc. 27					5. Certificate of Status Desired			5 Additions Required	Bi
City & State	е	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			,	
Ζ ιρ	Country	28] Zip	Country	,					
24]	25	29	30	'	 This corporation owes or has pail Personal Property Tax due June 		eniyear] Yes	Intangible	
[4]	g, Name and Address of Curre		1301		10. Name and Address of New Reg				
RA	RRIOS, JULIO		81	Name					
5251 SW 7TH STREET				Stroot Add	ress (P.O. Box Number is Not Acceptable	lo)			
MIAMI FL 33134			82	Street Add	ress (r.o. box Number is Not Acceptable			·	
			83	}					
			B4	City		FL	85 Z	ip Code	
SIGNATURE	Signature, typist or printed name of registere tie				poration submits this statement for the prition's board of directors. I hereby acceptions when reinstating)	DATE			_
12.		ND DIRI CTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	DPT	☐ DELETE	1.1 TITLE				Chang	je 🔲 Ado	dition
NAME	RODRIGUEZ, SILVIA]					
STREET ADDRESS			1.3 STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33145		1.4 CITY - 8	ST-ZIP					
TITLE	DVS	DELETE	2.1 TITLE				Chang	je 🔲 Add	dition
NAME	BARRIOS, JULIO		2.2 NAME)					
STREET ADDRESS	1249 SW 19TH TER		2.3 STREET	ADDRESS					
CITY - ST - ZIP	MIAMI FL 33145		2. 4 CITY -	ST-ZIP					
TITLE		DELETE	3.1 TITLE				Chang	pe L∐Adk	dition
NAME			32 NAME	ł					
STREET ADDRESS			33 STREET	ADDRESS					
CITY-\$1-ZIP			3.4. CITY-	SI-ZIP			_		
TITLE		☐ DETEIE	4.1 TITLE	}.			☐ Chang	je 🔲 Add	dition
NAME			4.2 NAME	1					
STREET ADDRESS			4.3 STREET	ADORESS					
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP					h Mai
TITLE		L DELETE	5.1 TITLE	}			☐ Chang	je 🔲 Add	dition
NAME			5.2 NAME						
CTOCCT ADDDCCC				ANNOTES					

1. Thereby certify that the information supplied with this filling 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 of the c

5.4 CITY - ST - ZIP

63 STREET ADDRESS

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

/orlugies

DELETE

(305) 461-1931

FILED

Feb 26 1998 8:00am

Secretary of State

125CC4 (1009/)