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**CORPORATION
ANNUAL REPORT
1995**



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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000074212

1. Corporation Name

**JUMER. SONS CORP.
TIGOURN SEAFOOD REST.**

Principal Place of Business

Mailing Address

**3970 W. 16 Ave.
Hialeah, FL 33012**

**3970 W. 16 Ave.
Hialeah, FL 33012**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

10-10-94

4. FEI Number

Applied For

65-0537100

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for the information per Chapter 6, 1995 (1992)

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21. 3970 W. 16 Ave.

26. SAME

Suite, Apt. #, etc

Suite, Apt. #, etc

22.

27.

City & State

City & State

23. Hialeah, FL 33012

28.

Zip

Country

Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JULIO M. GALERO
8240 N.W. 168 St.
MIAMI, FL 33016**

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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent or officer or director

(If officer or director, signature required when recording)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D President

NAME

JULIO GALERO

STREET ADDRESS

8240 N.W. 168 St

CITY ST ZIP

MIAMI, FL 33016

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY ST ZIP

☐ Change ☐ Addition

800001488448

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******200.00 ****200.00**

☐ Change ☐ Addition

TITLE

D Sec/Treasurer

NAME

MERCEDES GALERO

STREET ADDRESS

8240 N.W. 168 St.

CITY ST ZIP

MIAMI, FL 33016

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption found in Section 119.07(3)(b), 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: *Julio M. Galero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-15-95

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