FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 · DOCUMENT #

1. Corporation Name

P94000075680 (6)

J & A CONSTRUCTORS, INC.

Mailing Address

3112 FOREST BLVD JACKSONVILLE FL 32246

Pinicipal Place of Business

3112 FOREST BLVD JACKSONVILLE FL 32246 APPROVED AND FILET

95 FED - 5 1111:50

SECURIARY OF STATE TALLAHANSEE, FLORIDA



JACKSONVIL	LLE FL 32246	JACKSONVILLE PL 34	6290					
					3. Date Incorporated or Qualified 10/13/1994	3a. Date	10/13/1	995
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number	*		pplied For
1		26			59-3296188			lot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional tequired	
City & State		City & State			Election Campaign Financing		\$5.00	May Be
		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Co	untry	8. This corporation has liability for		x under s	199.032,
1	25	29	30	T		s □No	l nant	
	9. Name and Address of Current	Registered Agent		04 1	10. Name and Address of New I	registered A	(gent	
				B1 Name				
SANCHEZ, JAMES B				82 Street	reet Address (P.O. Box Number is Not Acceptable)			
3112 F	OREST BLVD							
JACKS	ONVILLE FL 32246			83				
				84 City		-	85 Zg	Code
				<u> </u>	orporation submits this statement for the pu	<u>FL</u>		
familiar with	i, and accept the obligations of, Section	n 607,0305, Florida Statutes.			board of directors. Thereby accept the appropriate when renshiting	DATE		
	grinture, bywid cepwinted name chregistered agreet a OFFICERS AND	The same of the sa	13	 	ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
2. ILF	OFFICE RS AND	DELETE		TITLE			Change	Addition
	SANCHEZ, JAMES B		1.2	NAME				
AME THEFT ADDRESS	3112 FOREST BLVD			STREET ADDRESS				
İ	JACKSONVILLE FL 32246			City-ST-ZiP	ļ			
01Y-51-20F 11LF	D	DELETE		TITLE		(Change	☐ Addition
AM:	SANCHEZ, PRISCILLA A	_	22	NAME				
TREET ADDRESS	3112 FOREST BLVD		23	STREET ADDRESS	Corner Corner	0001	7110	าวกก
ITY ST-ZIP	JACKSONVILLE FL 32246		2.4	CITY-ST-ZIP		0.700()	1104E-	_ñ23
11 t. 21. 21 1	D	☐ DELETE	3 1	TITLE	****	8 /96 0 200.00	This.	
AME	LEVINSON, ALLAN P		3 2	NAME	वित्य करत	200.00	.,,	200100
JERT ADORESS	3533 HYACINTH ST		33	STREET ADDRESS				
JUY SE-ZIP	JACKSONVILLE FL 32254		3 4	CITY-ST-ZIP				
lift.f	D	☐ DELETE	4	TITLE			Change	Addition Addition
NAME	RAUCH, LEANN		4.2	NAME				
STREET ADDRESS	3533 HYACINTH ST		4.3	STHEET ADDRESS				
CIY SI-ZP	JACKSONVILLE FL 32254		4.4	CITY - ST - ZIP				
) `(f		☐ DELE1E	5	1 TITLE			Change	Addition
NAME			5.2	! NAME				
STREET ALKERESS			53	STREET ADDRESS				
011Y - \$1 - ZIF			54	CITY - ST - ZIP				
Titt		DELETE	6	1 TITLE			Change	Addition
NAME			6	NAME				
STHEFF FADDRESS			6:	STREFT ADDRESS				
City-St. ZiP			6	CITY-ST-ZIP				
	1				with the the execution stated in Section 1:	10 D7/21/L/ E!	orida Stati	nee I further

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 office or director of the ordination 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 changer for on an attachment with an address.

SIGNATURE: ALLE SAUCHEZ

1-20-96 904-646-9391

CR2E034 (12/95)