

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

PERCENT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000003816 (2)**

J. ELECTROMIC INTERNATIONAL, CORP.



11297 SW 11 STREET
PEMBROKE PINES FL 33025

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PEMBROKE PINES FL 33025

2. Principal Office of the Corporation
21. City
22. State
23. Zip
24. Name and Address of Current Registered Agent
25. Name
26. Address
27. City
28. State
29. Zip
30. County

3. Date Incorporated or Organized: **01/13/1995**

3a. Date of Last Report: _____

4. FLE Number: **65-0548534**

5. Certificate of Status Desired: Applied For Not Applicable

6. Election Campaign Financing Trust Fund Contribution: **\$8.75 Additional Fee Required**

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No **\$5.00 May Be Added to Fees**

10. Name and Address of New Registered Agent

ZAMBRANO, JORGE E
11297 SW 11 STREET
PEMBROKE PINES FL 33025

81. Name
82. Street Address, P.O. Box Number, Not Acceptable
83. City
84. City
85. Zip Code **FL**

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office to the address herein set forth in Florida Statutes, and that the change was approved by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida.

12. OFFICERS/DIRECTORS

PTD
ZAMBRANO, JORGE E
11297 SW 11 STREET
PEMBROKE PINES FL 33025
VSD

GOYES, JUAN C
11297 SW 11 STREET
PEMBROKE PINES FL 33025

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME Change Addition

2. NAME Change Addition

3. NAME Change Addition

4. NAME Change Addition

5. NAME Change Addition

6. NAME Change Addition

7. NAME Change Addition

8. NAME Change Addition

9. NAME Change Addition

10. NAME Change Addition

14. I hereby certify that the information given to the Division is true and correct and does not qualify for the exemption stated in Section 199.03(9)(c), Florida Statutes. I further certify that the information is true and correct and does not qualify for the exemption stated in Section 199.03(9)(c), Florida Statutes, and that my signature shall have the same legal effect as if made under oath. I understand the consequences of this report and I am empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the corporation's books as an officer or director.

SIGNATURE: *X*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-96 (008)610-1205

CR2E034 (12/95)