

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000006709 (6)

1. Corporation Name
J&J GRAMCKO, CORP.

Principal Place of Business 2544 E SUNRISE BLVD GALLERIA MALL L-9 FT LAUDERDALE FL 33304 US	Mailing Address 2544 E SUNRISE BLVD GALLERIA MALL L-9 FT LAUDERDALE FL 33304 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/25/1995	
4. FEI Number 65-0573713	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent HENDLER, LEIGH A. CPA 1515 UNIVERSITY DR. STE 107A CORAL GABLES FL 33071

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	DE GRAMCKO, JUANA T
STREET ADDRESS	241 SEVILLA AVENUE STE. 805
CITY-ST-ZIP	CORAL GABLES FL 33149
TITLE	SD <input type="checkbox"/> DELETE
NAME	GRAMCKO, JEANNIFFER
STREET ADDRESS	241 SEVILLA AVENUE STE. 805
CITY-ST-ZIP	CORAL GABLES FL 33149
TITLE	VD <input type="checkbox"/> DELETE
NAME	GRAMCKO, ERNESTO
STREET ADDRESS	241 SEVILLA AVENUE STE. 805
CITY-ST-ZIP	CORAL GABLES FL 33149
TITLE	VD <input type="checkbox"/> DELETE
NAME	GRAMCKO, ERNESTO F
STREET ADDRESS	241 SEVILLA AVENUE STE. 805
CITY-ST-ZIP	CORAL GABLES FL 33149
TITLE	VD <input type="checkbox"/> DELETE
NAME	GRAMCKO, CARLOS E
STREET ADDRESS	241 SEVILLA AVENUE STE. 805
CITY-ST-ZIP	CORAL GABLES FL 33149
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DE GRAMCKO, JUANA T.
1.3 STREET ADDRESS	2544 E. SUNRISE BLVD.
1.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33304
2.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	GRAMCKO, JEANNIFFER
2.3 STREET ADDRESS	2544 E. SUNRISE BLVD.
2.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33304
3.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	GRAMCKO, ERNESTO
3.3 STREET ADDRESS	2544 E. SUNRISE BLVD.
3.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33304
4.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	GRAMCKO, ERNESTO F.
4.3 STREET ADDRESS	2544 E. SUNRISE BLVD.
4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
5.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	GRAMCKO, CARLOS E
5.3 STREET ADDRESS	2544 E. SUNRISE BLVD.
5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 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: *Jeanniffer Gramcko* x 3/22/98 954-5630203

CR2E034 (10/97)