FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996 4-11-96 B-3895 C

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

DOCUMENT # P95000008358 (0)

1. Corporation Name

JOAMOL CORPORATION

Principal Place of Business
6741 SW 24 ST.
MIAMI FL 33155

Mailing Address
6741 SW 24 ST.
MIAMI FL 33155

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 6741 SW. 24 ST.
Suite, Apt. #, etc.
27 #54
City & State
28 MIAMI, FL.
Zip 29 33155 Country 30 U.S.A.

3. Date Incorporated or Qualified: 02/01/1995

3a. Date of Last Report

4. FEI Number: 65-0552971 ☐ Applied For ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. **Name and Address of Current Registered Agent**

TRUJILLO, AMPARO
67 SW 24 ST, 54
MIAMI FL 33155

10. **Name and Address of New Registered Agent**

81 Name TRUJILLO, AMPARO
82 Street Address (P.O. Box Number is Not Acceptable) 6741 S.W. 24 ST.
83 #54
84 City MIAMI FL 85 Zip Code 33155

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, if filed by the agent) (R.A. Registered Agent Signature required before filing) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	BOTERO, OLGA L	
STREET ADDRESS	67 SW 24 ST, 54	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	DVS	☐ DELETE
NAME	TRUJILLO, AMPARO	
STREET ADDRESS	67 SW 24 ST, 54	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	DT	☐ DELETE
NAME	TRUJILLO, JOSE F	
STREET ADDRESS	67 SW 24 ST, 54	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	6741 S.W. 24 ST. #54	
1.4 CITY-ST-ZIP		
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	6741 SW 24 ST. #54	
2.4 CITY-ST-ZIP		
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	6741 SW. 24 ST. #54	
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 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: (P) Amparo 3/26/96 (305) 267-0029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone