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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000030672 (6)

FILED Apr 20 1998 8:00am Secretary of State

JFJ ENTERPRISES, INC.					
Principal Plac	e of Business	Mailing Address			
•		· ·	uene		
LONGBOAT K	OF THE FLOWERS EY FL 34228	15 AVENUE OF THE FLOW LONGBOAT KEY FL 34228		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				04/14/1995	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		65-0573382 Not Applicabl	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		S8.75 Additional	
22		27		Certificate of Status Desired Fee Required	
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Z ip	Country	Zφ	Country	8. This corporation owes or has paid the current year Intangible	
24	25		30	Personal Property Tax due June 30.	
-	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
BA	RTLETT, CHARLES J>		B1 Name	WEPH R AMANTE	
2033 MAIN STREET; STE. 600			82 Street Ac	Idress (P.O. Box Number is Not Acceptable)	
'sa	RA SOTA FL 342 37		4	410 BYETER DR. BOT 1-201	
			83 4/3	390 BXETEN DK BPT. I-202	
			RA City	6N6176AT KEY FL 85 Zip Code 34228	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute			
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 opporation'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	Transition of Marian		tos	rep & master 4-14-98	
OIGHATORE	Stonature, typed or printed name of registered again		Registered Agent signature re	quie U when reinstating) DATE	
12.	OFFICERS AND		13. //	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 THILE	Change Additio	
NAME	am ante, Joseph R		1.2 NAME	- 0 - ADT 1 - 010	
STREET ADDRESS	-4410-EXETER DRIVE APT K302	2		4390 EXETER DR. APT 1-262	
CITY-ST-ZIP	-LONGBOAT KEY FL		1.4 CITY-ST-ZIP	LONGBOAT KEY, PL 34228	
TITLE	VP	☐ DELETE	2.1 TITLE	Change Additio	
NAME	HUI YEE, SUN		2.2 NAME		
STREET ADDRESS	1251 SW 102 AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL		2 4 City-ST-ZiP		
TITLE	D	☐ DELETE	3.1 TITLE	Change Additio	
NAME	HOI POON, YIU		3.2 NAME		
STREET ADDRESS	Y-5050 N. TAMIAMI TRAIL		3.3 STREET ADDRESS	2760 CLUB MAR DOIVE	
CITY-ST-ZIP	-BARASOTA FL 34234		3.4. CITY-ST-ZIP	SARASOFA, FL 34237	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Additio	
NAME	WONG, SHU MAN		4 2 NAME		
STREET ADDRESS	615 PALM AVE S.		4.3 STREET ADDRESS	and the second of the second of	
CITY-ST-ZIP	\$ARASOTA FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Additio	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	Change Additio	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	artily that the information supplied with	h 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 supplied with this nining does not quality for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. 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 chapted, or on an attachment with an address.

4-14-98

941-2820522