

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01, 1996 08:00 A
Secretary of State

DOCUMENT # **P95000034573 (2)**

1. Corporation Name

J AND J SPECIAL SERVICES, INC.



Principal Place of Business

Mailing Address

**1011 S.W. 139TH COURT
MIAMI FL 33184**

**1011 S.W. 139TH COURT
MIAMI FL 33184**

2. Principal Place of Business

2a. Mailing Address

21 **1702 SW 8 street**

26 **same as 2a.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **miami, FL**

28 City & State

Zip

Country

Zip

Country

24 **33135**

25 **Dade**

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

05/03/1995

4. FEI Number

Applied For

65-0578928

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

10. Name and Address of New Registered Agent

**BURGOS, JULIO
1011 S.W. 139TH COURT
MIAMI FL 33184**

81 Name **Jose R. Garcia**

82 Street Address (P.O. Box Number is Not Acceptable)

1702 SW 8 street

83

84 City **miami**

FL

85 Zip Code **33135**

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 **Jose R. Garcia**

Date: Four best agent signature space (date) (date)

DATE **4/29/96**

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **BURGOS, JULIO**
STREET ADDRESS **1011 S.W. 139TH COURT**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE **D** ☐ DELETE
NAME **GARCIA, MARIE R**
STREET ADDRESS **1011 S.W. 139TH COURT**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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. TITLE **PRESIDENT** ☐ Change ☒ Addition
2. NAME **Jose R. Garcia**
3. STREET ADDRESS **5370 NW Avenue**
4. CITY-ST-ZIP **Miami, FL 33118**

2. TITLE ☐ Change ☐ Addition
2. NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
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

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)(a), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

marie R. Garcia

4/29/96 644-1127

CR2E034 (12/95)