## 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 #

Principal Place of Business

7441 N.W. 78TH STREET

2. Principal Place of Business

MOYAL, PATRICK R 82 N. UNIVERSITY DRIVE

PEMBROKE PINES FL 33024

Sulte, Apt. #, etc.

City & State

22

23

24

Zip

MEDLEY FL 33015

P95000042042 (8)

Mailing Address

MEDLEY FL 33015

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

Country

9. Name and Address of Current Registered Agent

7441 N.W. 78TH STREET

J & E GROUP, INC.

NS	Secretary of State						
	DO NOT WRITE IN THIS SPA	CE					
	3. Date Incorporated or Qualified 05/30/1995						
	4. FEI Number	Applied For					
	65-0585713	Not Applicable					
	5. Certificate of Status Desired	88.75 Additional Fee Required					
	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees					
	This corporation owes or has paid the current Personal Property Tax due June 30.						
	10. Name and Address of New Registered Age	nt					
Name							
Street	Address (P.O. Box Number is Not Acceptable)						
City	FL 8	5 Zip Code					
named he corp	corporation submits this statement for the purpose of chaporation's board of directors. I hereby accept the appoint	anging its registered ment as registered					
signature	required when reinstaling) DATE						
	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12 Change Addition					
		Change					

**FILED** 

Apr 15 1998 8:00am

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-name office or registered agent, or both, in the State of Florida. Such change was authorized by the coacent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

82

City

30

-go	Training that one good the obligations of	000000,00000,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SIGNATURE	Signature, typed or printed name of registered agent and title it	applicable (NOTE	Registered Agent signature requi	ired when reinstaling)	DATE	
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT			S IN 12
TITLE	P	DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	FREWA, ELIA		1.2 NAME			
STREET ADDRESS	1278 GINGER CIRCLE		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33326		1,4 CITY - ST - ZIP			
TITLE		DELETE	2.1 TITLE		☐ Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		DELETE	31 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TETLE		Change Change	Addition
NAME (			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME	•		
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	·		

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 resolver or trusten 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 its address.

**SIGNATURE:** 

Apr 9/98

305-805-0518