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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #** 

P95000052150 (6)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

96 MAY IN PM I: 17

1. Corporation	name	•		JOHAI	
ROSC	D, INC.			i a <b>n e</b> llen dan dan banda belah	JANK BANG BANG ANNA MBALAMBA BING BANG NAKA
Drivers Dress	4. D	A A - 1 A - 1 - 1			
Principal Place	or Business	Mailing Address			
B11 EAST 37 ST. HIALEAH FL 33013		811 EAST 37 ST. HIALEAH FL 33013			
				<ol> <li>Date incorporated or Qualified 07/06/1995</li> </ol>	3a. Date of Last Report
2. Principal Pla	ice of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #	t olo	Suite Apt. #, etc		63-03-77	Not Applicable
22				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z <sub>P</sub> ρ	Country	Zip	Country	8. This corporation has liability fo	
24	25 9. Name and Address of Curre	29	[30]	Florida Statutes Ye 10. Name and Address of New	es 🕅 No
	a, maine and Address of Curre	in registered Agent	81 Name		4 4
SODIA	NO, ROGELIO			TOMASA TRINIC	lad
	AST 37 ST.		82 Street A	Address (P.O. Box Number is Not Accepted	ible)
	NH FL 33013		83	01/ 1= 1 J Well	4
11440	# 1 1 E 900 TO				
• i			<b>84</b> City	Fluitzi b	FL 85 Zip Code
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NAME	SORIANO, ROGELIO		1.2 NAME	TUMOSA TRIVING	and a
STREET ADDRESS	811 EAST 37 ST.		1.3 STREET ADDRESS	TUMESA TRIVINGA 811 E 37 START	•
CITY-ST-ZIP	HIALEAH FL 33013				
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roo hereby certify that the information supplied with this lining is voluntarily formered and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further certify that the information indicated on this annual report is ruped 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

5-8-94 305-691-6931