

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

96 AUG 23 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000057217 (8)

1. Corporation Name

JAF DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

8855 NW 117TH STREET
HIALEAH GARDENS FL 33016

8855 NW 117TH STREET
HIALEAH GARDENS FL 33016

3. Date Incorporated or Qualified

07/24/1995

3a. Date of Last Report

4. FEI Number

65-0593156

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 ☒

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERRER, JOSE C
8855 NW 117TH STREET
HIALEAH GARDENS FL 33016

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0532 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 and title if applicable

(NOTE: New Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

11. TITLE

☐ Change ☐ Addition

NAME

FERRER, JOSE C

12. NAME

STREET ADDRESS

8855 NW 117TH STREET

13. STREET ADDRESS

CITY - ST - ZIP

HIALEAH GARDENS FL 33016

14. CITY - ST - ZIP

100001933051

-08/27/96--01105--009

****375.00 ****375.00

☐ Change ☐ Addition

TITLE ☐ DELETE

21. TITLE

NAME

FERRER, JUAN C

22. NAME

STREET ADDRESS

1000 W. FLAGLER STREET LOT A 125

23. STREET ADDRESS

CITY - ST - ZIP

MIAMI FL 33174

24. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

31. TITLE

NAME

FERRER, CATALINA

32. NAME

STREET ADDRESS

1000 W. FLAGLER STREET LOT A 125

33. STREET ADDRESS

CITY - ST - ZIP

MIAMI FL 33174

34. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

41. TITLE

NAME

42. NAME

STREET ADDRESS

43. STREET ADDRESS

CITY - ST - ZIP

44. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

51. TITLE

NAME

52. NAME

STREET ADDRESS

53. STREET ADDRESS

CITY - ST - ZIP

54. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

61. TITLE

NAME

62. NAME

STREET ADDRESS

63. STREET ADDRESS

CITY - ST - ZIP

64. CITY - ST - ZIP

☐ Change ☐ Addition

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 recorder or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE C. FERRER, 8/21/96 305-8283118