

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P950000061018 ()

1. Corporation Name

JOVE INC.

Principal Place of Business

Mailing Address

820 E. 39TH PL
HIALEAH FLORIDA 33010

2. Principal Place of Business

2a. Mailing Address

21 2300 CORAL WAY

26 2300 CORAL WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MIAMI FLORIDA

28 MIAMI FLORIDA

Zip

Country

Zip

Country

24 33145

25 US

29 33145

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

8 / 8 / 95

3a. Date of Last Report

4. FEI Number

65-0599141

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

FLORIDA ANNUAL REPORT SERVICES INC.

2300 CORAL WAY, SUITE # 200

MIAMI FLORIDA 33145

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent, and agent's address

NOTE: Registered Agent signature required when reappointing

DATE

AMADA CANTERA LOPEZ, PRES 4/24/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P/D/S. VENTURA JORGE

STREET ADDRESS 820 East 39th PL

CITY-STATE-ZIP HIALEAH FLORIDA

TITLE ☐ DELETE

NAME VP. SABILLON ORBIN JAVIER

STREET ADDRESS 820 East 39th PL

CITY-STATE-ZIP HIALEAH FLORIDA

TITLE ☐ DELETE

NAME T/ ALVARADO ALEJANDRO

STREET ADDRESS 820 East 39th PL

CITY-STATE-ZIP HIALEAH FLORIDA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-STATE-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)(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 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

JOSE VENTURA

4/24/96