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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

P95000064068 (6)

DOCUMENT # 1. Corporation Namie

L. JONES, INC.



Principa Piace of Business Mailing Address  2443 NW 55 AVE 2443 NW 55 AUDERHILL FL 33313 LAUDERHILL			3313				
					3. Date Incorporated or Qua 08/17/1995	lified 3a. Dal	te of Last Report
2. Principa' Plac	ce of Business	2a. Mailing Address			4. FEI Number Applied Fo	 ?K	Applied For Not Applicable
Suite, Apt. #, etc. City & State		Sinte, Apt. #, etc. 27			5. Certificate of Status Desired S8.75 Additional Fee Required		
		City & State		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zφ	Country	Ziji	Count	у	8. This corporation has liability	ty for intangible t ] Yes □ No	tax under s. 199.032,
4	25 25 9, Name and Address of Currer	29 Anna Anna	30		Florida Statutes L.  10. Name and Address of I		I Agent
	9, Maille and Address of Culter	it negistered Agent	8	1 Name	(O. Namo Bita Addicas of t		
BARITO	ON, JACK			82 Street Address (P.O. Box Number is Not Acceptable)			
	V OAKLAND PARK BLVD		82 Street Add		ress (P.O. Box Number is Not Acc	septable)	
SUNR	SE FL 33351		8	3			
			8	4 City			85 Zip Code
	trie provisions of Sections 607.050		-	1		Fi	<b>_</b>   '   '
12. THLE NAME STREET ADORESS	PD Robinson, Mary J 2443 NW 55 Ave	ID DIRECTORS	13. 1 1 100 1 2 NAM 1 3 STRS		ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTORS IN 12  Change Add-tion
.th - \$! - Z#	Lauderhill FL 33313		1				
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4. Edu 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 in othe 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 OF DIRECTOR

1/26/96 -4860356

CR2E034 (12/95