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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P05000071584 (3)

J J ROCKY SALES CORP.						
Principal Place of Business	Mailing Address			† (00):000) sea loran derre anter obser an	11ft <b>20</b> ft 1 <b>00</b> 01 1	iner briði færti miði ræm
15611 CEDAR GROVE LANE WEST PALM BEACH FL 33414  15611 CEDAR GROVE LANE WEST PALM BEACH FL 33414						
				3. Date Incorporated or Qualified 09/14/1995	3a. Date	of Last Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
1	26			65-060 9252		Not Applicable \$8.75 Additional
Suite, Apt. #, etc	Suite, Apt #, etc.			5. Certificate of Status Desired		Fee Required
City & State	City & State			6. Election Campaign Financing		<b>\$5.00</b> May Be
3	28			Trust Fund Contribution		Added to Fees
Zip Country	Zip	Countr	ry	8. This corporation has liability for	intangible i	ax under s. 199 032.
25	29	30		Florida Statutes  10. Name and Address of New Re	Yes 🔼	ent
9. Name and Address	of Current Registered Agent	8	1 Name	10. Name and Address of New III	egistered A	¥
FRIED, LORI					.hla)	
15611 CEDAR GROVE LAN	lE .	6:	2 Street Add	t Address (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33	3414	8	3		·	
			4 City			85 Zip Code
11. Pursuant to the provisions of Section		1	1 1		<u>FL</u>	l I
	is 607.0502 and 607.1508, Florida Statu I the State of Florida. Such change was I the obligations of, Section 607.0505, F			, , ,	,	
SIGNATURE Signature: typed or prorted name of	requitered agent and their applicable (NO	015 Registered A		red when repstating)	DAIL LOEBS AND	DIRECTORS IN 12
SIGNATURE Signature typed or protect name of OFF	registered agent and the if applicable (NC ICERS AND DIRECTORS	)'i: Flegistered A	Agent signafüre requ			
SIGNATURE Signature typed or promote near state.  12. OFF BILE D	requitered agent and their applicable (NO	13.	Agent segnature, reque	red when repstating)		
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SIGNATURE: \_

made under oath; that I am an officer or director of the corporation or the receiver or trustee emthat my name appears in Block 13 or Block 13 it changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/7/96 5/65462588

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