

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90049 016 \*\*\*150.00



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

PROFIT CORPORATION  
ANNUAL REPORT  
1999

DOCUMENT #

1 Corporation Name

J+A Investments, INC.



Principal Place of Business

Mailing Address

7916 SW 104 ST  
MIAMI, FL. 33156

7916 SW 104 ST  
MIAMI, FL. 33156

Date Incorporated or Qualified

10-12-95

2 Principal Place of Business

21 Mailing Address

21 7916 SW 104 ST

26 Suite, Apt. #, etc.

4 FEI Number

65-0607201

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27

5 Certificate of Status Desired

\$8.75 Additional Fee Required

23 MIAMI FL.

28 City & State

6 Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 33156 25 USA

29 Zip Country

7 This corporation owes the current year Intangible Personal Property Tax.

Yes No

8 Name and Address of Current Registered Agent

9 Name and Address of New Registered Agent

AARON Whitman  
14450 SW 163 terr.  
MIAMI, FL. 33177

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 607.0502 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-99

12 OFFICERS AND DIRECTORS

13

TITLE  DELETE

1.1 TITLE  Change  Address

NAME AARON Whitman

1.2 NAME

STREET ADDRESS 14450 SW 163 terrace

1.3 STREET ADDRESS

CITY, ST, ZIP MIAMI, FL. 33177

1.4 CITY-ST-ZIP

TITLE  DELETE

2.1 TITLE  Change  Address

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY, ST, ZIP

2.4 CITY-ST-ZIP

TITLE  DELETE

3.1 TITLE  Change  Address

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY, ST, ZIP

3.4 CITY-ST-ZIP

TITLE  DELETE

4.1 TITLE  Change  Address

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY, ST, ZIP

4.4 CITY-ST-ZIP

TITLE  DELETE

5.1 TITLE  Change  Address

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY, ST, ZIP

5.4 CITY-ST-ZIP

TITLE  DELETE

6.1 TITLE  Change  Address

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY, ST, ZIP

6.4 CITY-ST-ZIP

14 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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, with all other like empowered.

SIGNATURE:

AARON Whitman / 4-29-99 / (305) 278-8200