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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000076393

J&C INSURANCE & TRAVEL, INC.

Principal Place of Business 033 SW 28 WAY

Mailing Address

2033 SW 28 WAY

FILED Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90002 047 ***158.75



T. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/05/1995 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0611467 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intangible 29 30 Personal Property Tax. ∰Xés □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GONZALEZ, ISABEL D 2033 SW 28 WAY Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 1. 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 en reinstating) 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ſŁΕ ☐ DELETE 1.1 TITLE ☐ Addition МE GONZALEZ, ISABEL D 1.2 NAME R2E034 TREET ADDRESS 2033 SW 28 WAY 1.3 STREET ADDRESS TY-ST-ZIP FT. LAUDERDALE FL 33312 1.4 CITY-ST-ZIP TLE ☐ DELETE 2.1 TITLE ☐ Change ☐ Addition GONZALEZ, JOSE M ME 2.2 NAME REET ADDRESS 2033 SW 28 WAY 2.3 STREET ADORESS FT. LAUDERDALE FL 33312 TY-ST-ZIP 2. 4 CITY-ST-ZIP ΊE ☐ DELETE 3.1 TITLE ☐ Addition ME 🤈 🖯 3.2 NAME REET ADDRESS 3.3 STREET ADDRESS Y-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE MЕ 4. 2 NAME REET ADDRESS 4.3 STREET ADDRESS Y-ST-ZIP 4.4 CITY-ST-ZIP Œ ☐ DELETE 51 TITLE ☐ Addition ИF 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP 5.4 CITY-ST-ZIP GIAMBLE, II. ☐ DELETE 6.1 TITLE Change ☐ Addition 免的 等 拉刀 6.2 NAME **新、研究研究中的工作**位 REET ADDRESS ∴ST-ZIP 6.4 CITY-ST-ZIP

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 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, with all other like empowered.