

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

FILED
Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000086970 (7)

1. Corporation Name
JAC-MAR CONSTRUCTION CORP.



Principal Place of Business

7880 WEST 20TH AVE.
BAY 25
HIALEAH FL 33016

Mailing Address

7880 WEST 20TH AVE.
BAY 25
HIALEAH FL 33016-1896

3. Date Incorporated or Qualified
11/14/1995

3a. Date of Last Report
04/28/1996

2. Principal Place of Business

21 7880 W 20th Ave

22 Suite, Apt. #, etc.
BAY # 35

23 City & State
Hialeah FL.

24 Zip
33016

25 Country
U.S.A.

2a. Mailing Address

26 7880 W. 20th Ave

27 Suite, Apt. #, etc.
BAY # 35

28 City & State
Hialeah FL.

29 Zip
33016

30 Country

4. FEI Number

65-0619483

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

LEW, BENNY L
7880 WEST 20TH AVENUE
BAY 25 - BAY #35
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name
Lew, Benny
82 Street Address (P.O. Box Number is Not Acceptable)
7880 W. 20th Ave BAY #35
83 BAY # 35
84 City
Hialeah FL
85 Zip Code
33016

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

HENRY LEW

2/4/97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
VP	LEW, HENRY	17890 W. DIXIE HWY #412	N.M.B FL 33180	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
VP	LEW HENRY	1931 N.E 211 ST	N.M.B. FL. 33179	<input type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition

14. I do 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.

SIGNATURE:

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HENRY LEW

2/4/97

DATE

(305) 826 2665

DAYTIME PHONE #

0124627

CR2E034 (9/96)