## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani

ANNUAL R 199		Secretary of State DIVISION OF CORPORATIONS						
DOCUMENT # P95000091264 (8)  1. Corporation Name  WONDERFUL J & Y, INC.								
Principal Place of Busi	ness	Maling Add	Iress			f idditakt tid bandt britt sater gant an		(IIII 8191 1491
1801 PALM BEACH WEST PALM BEACH	LAKES. #860		1801 PALM BEACH LAKES. #860 WEST PALM BEACH FL 33401			Date Incorporated or Qualified     11/29/1995		
2. Principa! Place of E	Business	2a. Maiting	Address			4. FEI Number		pplied For
21		26				65-0624315		lot Applicable  Additional
Suite, Apt. #, etc.		<b></b>	pt. #, etc.			5. Certificate of Status Desired	T	Additional lequired
22		27 Oity & 5	State			6. Election Campaign Financing	\$5.00	May Be
City & State		28				Trust rung Contribution		to Fees
Zip Country		Zip		Country		8. This corporation has liability for int	angible tax under s≕ ∏No	199.032,
24	25 Name and Address of Cu	29		0		10. Name and Address of New Reg		
9, 1	Talle and Rudiess of Ou	-		81	Name			
l	EACH FL 33069			83 84			<b>1-1</b> ( )	o Code
	provisions of Sections 607, ont, or both, in the State of discount the obligations of, accept the obligations of, as typed a photo make of registers.					oration submits this statement for the purp aird of directors. I hereby accept the appoil	DATE	
12.	OFFICER	S AND DIRECTORS		13.		ADDITIONS CHANGES TO OFFIC	Change	Addition
STREET ADDRESS 18	u, Joanne T 301 Palm Beach Lak	ES, #860	DELETE	1.2 NAME 1.3 STREET	T ADDRESS			_
CITY-ST-ZIP W	EST PALM BEACH FL		E OF FIG	1.4 CITY - 5	ST-ZIF		[7] Change	Addition
TITLE			☐ DELETE	2 1 TITLE 2 2 NAME				
NAME					1 ADDRESS			
STREET ADDRESS				2.4 CITY-1				
CITY-ST-ZIP TITLE		uu	DELETE	3 1 TITLE			Change	Addition
NAME				3 2 NAME				
STREET ADDRESS				33 STREE	ET ADDRESS			
CITY-ST-ZIP		,	ED profits	3 4 CiTY-			Change	Addition
TIFLE			☐ DELETE	4 1 113LE				
NAME				4.2 NAME	L ADDRESS			
STREET ADDRESS				4.3 STREE				
CITY-ST-ZIP			DELETE	5 1 TITLE			☐ Change	☐ Addition
TITLE				5.2 NAME				

64 CITY - ST-ZIP 14. If do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trusted en powered 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. CITY - ST - ZIP

DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

SQUATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 C/TY - ST- ZIP

6 1 TITLE

6.2 NAME

JOANNE T YU PRESIDENT (407)687-3683

☐ Change

☐ Addition

CR2E034 (12/95)