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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

SIGNATURE:

P95000094035 (9)

J & J INVESTMENTS, INC.

Principal Place of Business Mailing Address 10815 NW 14 STREET MIAMI FL 33172 10815 NW 14 STREET MIAMI FL 33172-2000 2. Principal Prace of Business 21 26						3. Date Incorporated or Qualified 12/08/1995 2/20/1996 4. FEI Number Applied For Not Applicable
Suite, Apt	#, Etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	le	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Z(p 24	Country 25	Zip 29	30 Co.	intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
<u> = 7 </u>	9, Name and Address of Curre		190	Ι		10. Name and Address of New Registered Agent
MARRERO, JORGE D. 10815 N.W. 14TH ST. MIAMI FL 33172				81 82 83 84	City	dress (P.O. Box Number is Not Acceptable) FL 85 Zip Code
11. Pursuant office or i agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the obtained the state of the section of the state of the section o	te of Florida. Such change was gamons of Sistion 207.0505, F	authorize Iorida Sta	d by lutes	the corporal	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered -22-7 uked when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TOTLE	D	☐ DELETE	1.1 []	TLE		☐ Change 🐹 Addition
NAME	MARRERO, JENNY C.		1.2 N	AME		
STREET ADDRESS	10010 111111 11111 011		1.3 \$	rreet a	AODRESS	
CITY-S1-ZIP	MIAMI FL		1.4.0	TY-\$1	r-zip	Miami FL 33M2
TITLE	P	L.J. DELETE	211	TLE		☐ Change 🙀 Addition
NAME	MARRERO, JORGE D.		22 N	AME		, e side
STREET ADDRESS	10815 N.W. 14TH ST.				ADDRESS	_
CITY-ST-ZIP	MIAMI FL	L DOLLAR		IV-S	T-ZIP	Miami FL 33172
TITLE	1	DELETE	3.1 TI			L Change Addition
NAME			3.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. C	ITY-S	7-ZIP	Change Addition
		E Dettet				Change Addition
NAME PERFET ARRESCOS			4. 2 N			
STREET ADDRESS					ADDRESS	
CHY-SY-ZIP TITLE		DELETE	4.4 C	TY-SI	- ZIP	☐ Change ☐ Addition
NAME		F-1 DECEME	5.3 N		}	Et cusufis El vocidori
STREET ADDRESS					ADDDECC	
					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 C	TY-\$T	- ZIP	Change Additio
NAME		F"1 prefet			ļ	The cualifier The Manual Control
STREET ADDRESS			6.2 N		ADDRESS	

14. If 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 extension with an address.

AND TYPE OTHER NAME OF STRAINED DESCRIPTION OF STRAINED OF STRAINE