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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000096760 (0) DOCUMENT #

1. Corporation Name

JONES BUILDERS, INC.

A PREMINDER HID NEIGH BEING BEING BEING BANK EIRIGE DEUER GURA FREIR BEING BERG HIEG.

						<u> </u>
Principal Place of Business Mailing Address 2509 E. SUPERIOR STREET 2509 E. SUPERIOR STREET						
OPA LOCKA FL 33054 OPA LOCKA FL 33054					Date Incorporated or Qualified	
					12/22/1995	55.5
		2a. Mailing Address			4. FEI Number	Applied For
2. Principal Pk	ace of Business	26			65-0640775	Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional
22	.,	27				- ree nequired
City & State		Orty & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23		28			8. This corporation has liability for i	
Ζφ	Country	Zip	Country		Florida Statutes Yes	□ No
24	9. Name and Address of Curr	29	30		10. Name and Address of New F	
	9. Name and Address of Culf	ent negistered Agent	81	Name		
LARLE IC	CLAUDIA I		02	Street Add	fress (P.O. Box Number is Not Acceptat	ole)
	CLAUDIA J 3RD AVENUE		82	Street Aud	noo processor	
	AUDERDALE FL 33304		83			
FURIT	WATERLE I F AND		84	City		85 Zip Code
			-	1	oration submits this statement for the purard of directors. I hereby accept the app	FL
12.		AND DIRECTORS	13.	··	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change
12.		AND DIRECTORS			ADDITIONS/CHANGES TO OFF	
TITLE	JONES, VESTA M	□ pereut	1.2 NAME			
NAME	ACAG E CUIDEDIAD STREE	т		LADDRESS .		
STREET ADDRESS	OPA LOCKA FL 33054	· •	14 GiTY -			
CITY - ST - ZIP TITLE	STD	DELETE	2 1 TULE			Change Addition
NAME	JONES, LEROY JR.		2.2 NAME			
STREET ADDRESS	ASAA E QUIDEDIAD STDEE	:T	2 3 STBD	1 ADDRESS		
CHY-ST-ZIP	OPA LOCKA FL 33054		2.4 CITY -	\$1-7(P		Change Addition
TITLE		DELETE	3 1 10 4			Change C Madrean
NAME			3.2 NAME	!		
STREET ADDRESS	5			STADDRESS		
CITY - ST - ZIP		DELETE	3.4 Cily 4.1 Tilu			Change Addition
TIFLE		[] Drittle	4 2 NAM			-
NAME				ET ADORESS		
STREET ADDRESS	s		4.3.51Mt			
CITY-ST-ZIF		DELETE	5 1 7171			Change Addition
TITLE			5.2 NAM	İ		
NAME OVER 1 ADDRES				ET ADDRESS		
STREET ADDRES	**		5.4 Ciliy			
CITY - ST - ZIP TITLE		DELETÉ	6 1 T Tu			Change 🔲 Addition
NAME			6.2 NAM	E		
STREET ADDRES	25		6.3 STR	ET ADDRESS		
SINCE I ADUNES			6.4 CITY	- \$1 - ZIF		

14. I do hereby certify that the information supplied with this filing 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 certify that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: 🛴

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-20-96 305) USI-4140

CR2E034 (12/95)