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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600005971 (2)

J.F.G. TRADING COMPANY

FILED Jun 03 1997 8:00am Secretary of State

Principal Place of Business	Mailing Address	4	I ISBILANE SIN FRIAN ACIDE MARIE ABRICA MATERIAL MARIE A	28/81 81110 (611) (638) 110) (9 8)
275 SW 180 AVENUE PEMBROKE PINES FL 33029	275 SW 180 AVENUE PEMBROKE PINES FL 3302	9-3903		
			01/19/1996	Date of Last Report
2. Principal Place of Business 21 10011 Dives Blvd.	2a. Mailing Address	ina Blud.	4. FEI Number	Applied For
Sulte, Apt. #, elc.	26 100 1 + Suite, Apt., #, etc.	INO DING.	45-11940 703	Not Applicable
22 #203B	27 #203-1	8	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Fembroke Pines Fl	- 28 embroke	Pines FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33004 25 USA 9. Name and Address of Curr		30 USA	8. This corporation has liability for intang Florida Statutes	1 72 No
	eur veðistelen yðeur	B1 Name	IV. Hallie and Address of New Hegister	ou agont
NAJJAR, NADER				
275 SW 180 AVENUE PEMBROKE PINES FL 33029		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	\
PEMDRUNE PRIES PL 33028		83		
		<u> </u>		10-11-5- O-11-
		84 City	F	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the State agent. I am familiar with, and accept the obtaining the second section.	te of Florida. Such change was a	uthorizet: by the corpora	poration submits this statement for the purposation's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE		·		
Signature, typed or printed name of registered	igont and tille if applicable (NOTE IND DIRECTORS	Registered Agen: signature requ	ADDITIONS/CHANGES TO OFFICERS	
	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICENS	Change Addition
NAME NABEL NATTAL	C2 store	1.2 NAME		_ ,
STREET ADDRESS 10011 PINES 2	V 111 # 2038	1.3 STHEET ADDRESS		[8
STREET ADDRESS LOOLL PINGS & CITY-ST-ZIP PEMBROKE PING	S.Fl. 33024	14 CITY-ST-ZIP		5
TITLE	DELETE	21 TITLE		☐ Change ☐ Addition <
NAME		22 NAME		
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-ST-ZIP		2 4 C(TY+ST-Z(P		
TITLE	☐ DELET€	3 1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3 4, CITY - ST - ZIP		
TITLE	☐ DELETE	41 1IILE		☐ Change ☐ Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY-ST-ZIP	T DECEME	4.4 CITY - ST - ZIP		Change Addition
TITLE 16	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NÅME		5.2 NAME		
STREET ADDRESS		53 STREET ALMMESS 54 CHTY-ST-ZEP		
CITY-ST-ZIP	DELFTE	61 TITLE		☐ Change ☐ Addition
TITLE 19	- protie	6.2 NAME		Onlings FUUITION
NAME		6.3 STREET ADDRESS		
STREET ADDRESS		6.4 O1Y - ST - ZIP		
CITY-ST-ZIP 14. 1 do hereby certify that the information supp	lied with this filing does not qualif		It in Section 119,07(3)(i), Florida Statutes. I fu	orther certify that the

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 officier or director of the corporation or the receiver or trustee empowered to execute this result 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

14/20 67 Can upr=9