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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600038027 (4)

H & J LIMITED CORP.

Principal Place of Business Malling Address

-15444-SW-50TH-TER:--MIAMI-PL-3318515444 OW SOTH TER:

FILED
May 13 1997 8:00am
Secretary of State



										3. Date Incor 05/02/19		ualified	3a.	Date of Last R	eport	
2. Principal Place of Business 21 7921 S.W. 40 ST. #40				26. Mailing Address 26. 7921 S.W. 40 ST Suite 40 #. etc. 27.						4. FEI Number 65-0					plied For at Applicable	
Suite, Apt #, etc									Certificate of Status Desired Section							
Cdy 8 State FL				City & State 28 MIAMI FLORIDA						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip 24 33155		Country U.S.	Δ.		^{2ip} 33155		Countr	S.A.	_	,				ble tax under s	. 199.032,	
24 33100 25 U.S.A. 29 33 9. Name and Address of Current Registered Age						1001			•	Florida Statutes Yes No 10. Name and Address of New Registered Agent						
GAR	ICIA, HENF					-	81	Name						F i		
	44 SW 501						82	Stroot	Addrag	on /D O Pov Nic	mhor in Not	acente	blal			
	MI FL 3310						64	792	21°	ss (P.O. Box Nu S.W. 40	ST#	40	UI O)			
		•					8						····			
							84	City						85 Zip	Code	
							-	MI	AMI				F		Code 125	
11. Pursuant l	to the provis	ions of Section	s 607.0502	and 607	7.1508, Florida	Statutes,	the abo	ve-named	corpo	ration submits t	his statement	for the	purpose	e of changing it	s registered	
office or re agent 1 ac	egistered ag mifamiliar w	ient or both, if th, and accep	n the State (t the obliga	of Florida tions of, S	i. Such changi Section 607.09	e was auti 505, Floric	norized t la Statuti	y ine corp Ss.	ooratio	n's board of dir	ectors. I nere	by acce	pi me a	appointment as	registeren	
SIGNATURE			_													
SIGNATORI	Signature, typeo	or printed name of				(NOTE: R		gent signature	required	when reinstating)			DATI			
12.		OFF	ICERS AND	DIRECT			13.	 		ADDITIONS	CHANGES 1	O OFFI	CERS A	ND DIRECTOR		
TITLE	D, /				☐ DELI	ETE I	1.1 TITLE		I					Change	■ Addition	
		44641617												Barrel		
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	-15444 S -MAMI FI	V 50TH TER . 33185	_	y n'y y y y y y n'h n'h y h n'h n'h n'h n'h n'h n'h n'h n'h n'h n			1.2 NAME 1.3 STREE 1.4 City-	T ADDRESS ST-ZIP		21 S.W. AMI FL			40		,	
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If do hereby certify that the information supplied with this filling does not guarant to the exemption stated in section 119.0 (3)(f), Florida Statutes. Fluttine terrify 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; the Lam an officer or director of the corporation or the receiver in 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

DED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97 553-4333