

FILE NOW: FILING FEE AFTER MAY 15 IS \$50.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Moynihan  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 MAY 21 PM 4:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000042166 (4)

1. Corporation Name

J J & A Enterprises, Corp

Principal Place of Business

Mailing Address

13871 SW 9 TERRACE  
Miami, FL 33175

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5/16/96

4. FEI Number

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

SIEGFRIED, RIVERA, LERNER  
DE LA TORRE & SOBEL, P.A.  
201 Alhambra Circle, Suite 1102  
Coral Gables, FL 33134

710002536527--4  
-05/27/98-01047-012  
\*\*\*\*315.00 \*\*\*\*315.00

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME ☐ DELETE

PD  
LAGO, Julio A.  
13860 SW 10 TERRACE  
Miami, FL 33128

TITLE NAME ☐ DELETE

UD  
PRADO, Ariel  
13781 SW 10 TERRACE  
Miami, FL 33184

TITLE NAME ☐ DELETE

SD  
LAGO, JOAN C.  
13781 SW 9 TERRACE  
Miami, FL 33184

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 attachment with an address.

CR2E034 (10/97)