

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 19, 1999 8:00 am  
Secretary of State

04-19-1999 90076 013 \*\*\*150.00

DOCUMENT # P96000051690

1. Corporation Name  
JONAH & CO., INC.

Principal Place of Business

1609 ALTON RD  
MIAMI BEACH FL 33139

Mailing Address

1609 ALTON RD  
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/18/1996

4. FEI Number

65-0674199

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

GARCIA, MAGGIE  
5651 SW 88TH AVENUE  
MIAMI FL 33173

10. Name and Address of New Registered Agent

81 Name

GARCIA, ORLANDO JR.

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

5651 SW 88 AVE.

83

84 City

MIAMI

FL

85 Zip Code

33173

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

ORLANDO GARCIA JR.

4-14-99

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME GARCIA, MAGGIE  
STREET ADDRESS 5651 SW 88TH AVENUE  
CITY-ST-ZIP MIAMI FL 33173

☒ DELETE

TITLE SD  
NAME GARCIA, MAGGIE  
STREET ADDRESS 5651 SW 88TH AVENUE  
CITY-ST-ZIP MIAMI FL 33173

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT  
1.2 NAME GARCIA, ORLANDO JR.  
1.3 STREET ADDRESS 5651 SW 88 AVE.  
1.4 CITY-ST-ZIP MIAMI FL 33173

☐ Change

☒ Addition

2.1 TITLE SECRETARY  
2.2 NAME GARCIA, ORLANDO JR.  
2.3 STREET ADDRESS 5651 SW 88 AVE.  
2.4 CITY-ST-ZIP MIAMI FL 33173

☐ Change

☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-99

Date

(305) 643-4233

Daytime Phone #

CR2E034 (11/98)