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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000067066** (6) J.J.B., CORP.

FILED Feb 13 1997 8:00am Secretary of State



	Mailing Address		[
B466 WINDSOR DRIVE MIRAMAR FL 33025	8488 WINDSOR DRIVE MIRAMAR FL 33025-2843			
			3. Date Incorporated or Qualified 08/13/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
TILS made	26 9965 m	Frame PK	Mr. 65-069311	Not Applicable
Suile, Apt. #, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional
22 175	27 1 7 3		C. Berlindae or states besited	Fee Required
City & State	City & State	1 1	6. Election Campaign Financing	\$5.00 May Be
Zin Country		Country	Trust Fund Contribution	Added to Fees
	2025 3802S	30 COUNTY	8. This corporation has liability for in Florida Statutes	ntangibila tax under s. 199.032, Yes XX No
24 550 45. 25 D7	s of Current Registered Agent	30	10. Name and Address of New Reg	
ASNES, RONALD S	<u> </u>	81 Name		
701 PROMENADE DRIVE, S	SUITE 200	82 Street Addr	ress (P.O. Box Number is Not Acceptab	lo)
PEMBROKE PINES FL 330		62 Sireet Addi	ress (F.O. BOX Number is NOT Acceptab	
*		83		
• • •		84 City		85 Zip Code
	ons 607.0502 and 607.1508, Florida Statu	1		FL '
agent. I am familiar with, and acce	in the State of Florida. Such change was pt the obligations of, Section 607.0505, F	lorida Statutes.		DATE
	of registered agent and title if applicable (NO FICERS AND DIRECTORS	TE Registered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	
11/LE PSID	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
				C cisalide C vocinal
NAME SHAW, BERNARD	_	1.2 NAME		C outlide C vooring
STREET ADDRESS 8468 WINDSOR DRIV	VE			Grange Addition
	VE	1.2 NAME		Citaliys Adultui
STREET ADDRESS CITY-ST-ZIP 8468 WINDSOR DRIV MIRAMAR FL 33025	VE DELETE	1.2 NAME 1.3 STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·
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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 population or the receiver or truefee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 17 it changed, or on an attachment with an address.