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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 27 1997 8:00am

Secretary of State

Daytime Phone # 0001979

Sandra B. Mortham

Secretary of Sta DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # P96000096460 (6)

JLH IHA	DING INC.					
Principal Placi		Mailing Address			F HOUSINGS AID IN IN DRIVE DURIN ONLY BOLL BURN	<u> Sáina náibi átáila Babil báil féar</u>
17044 N.W. 11TH ST PEMBROKE PINES FL 33028		17044 N.W. 11TH ST PEMBROKE PINES FL 33028-2100				
					3. Date Incorporated or Qualified 3a 11/21/1996	a. Date of Last Report
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Suite, Apt	#, etc.	26 Suite, Apt. #, etc.			103 0713110	Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Reguired
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23] Zip	Country	28	Country		Trust Fund Contribution 8. This corporation has liability for intan	
24	25	1	30			s No
······································	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ered Agent
	TERIA, JOSE L		81	Name		è
17044 NW 11TH ST			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
PEMBROKE PINES FL 33028			83			
			64	City		FL 85 Zip Code
CICALATURE					poration submits this statement for the purpo tion's board of directors. I hereby accept the	
12.	Signature typics or print I have of registered as	ID DIRECTORS (NOTE	13.	ent signature requi	ired when reinstating) Di ADDITIONS/CHANGES TO OFFICERS	ATE S AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAMÉ	renteria, Jose L		1.2 NAME			
STREET ADDRESS	17044 NW 11TH ST		1.3 STREE	T ADDRESS		
CiTY-ST-ZIP	PEMBROKE PINES FL 33028	DELETE	1.4 CITY-	ST-ZIP		Change Addition
TITLE NAME			21 TITLE 22 NAME			Change L Addition
STREET ADDRESS				T ADDRESS		
COTY - \$1 - ZIP			2. 4 CITY -	1		
11116		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STHEET ADDRESS				T ADDRESS		
C:TY - ST - ZiF'		DELETE	3.4. CITY-			☐ Change ☐ Addition
TITLE		F" DETENT	4.1 TITLE 4. 2 NAME			C Outlings C Notition
STREET ADDRESS				T ADDRESS		
CHTY - ST - ZIP			4.4 CITY-	ST-ZIP		
TOLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CHY-SI-ZIP		DELETE	5.4 CITY-	ST - ZIP		Change Addition
TOTA F NAME		ריי מבנדוב	6.1 TITLE 6.2 NAME	ļ		EJ Orkange [] MUUIIIII
STREEL ADORESS				T ADDRESS		
CITY - ST - ZIP			6.4 CITY -	1		!
14. I do herel	and involve of medican their more continuous and analysis for	amountainmental anough concel in the	y for the ex	emption state	d in Section 119.07(3)(i), Florida Statutes. I f	not be if made under oath, that
intermatic Lam an e appears	in moleated on this annual report or tricer or director of the corporation o in Block 12 or Block 13 if changed, o	supplemental annual report is to the receiver or trustee empower or on an altrachment with an add	oe and acc ered to exe ress.	cute this repo	n my signature shail nave the same legal end ort as required by Chapter 607, Florida Statul	es; and that my name