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PROFIT *
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

P97000017570 (7)

Principal Place of Business

JOB 1, INC.

Mailing Address

FILED Feb 06 1998 8:00am Secretary of State



5812 SW 26TH ST 5812 SW 26TH ST HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/24/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0732043 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MOORE, DAVID 81 たいろ. 5319 NO DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable **B2** FORT LAUDERDALE FL 83 accurillett 84 85 Zip Code 330∂3 Hollywood 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 chango was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objections of, Section 607.0505, Florida Statutes.

SIGNATURE

L. 3. ALL

SIGNATURE **SIGNATURE** iled name of registered agent and time if applicable (NOTL: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE ☐ Change 111016 ___ Addition tresident CEO. NAME 1.2 NAME JUSE, O. HERMANDEZ STREET ADDRESS 1.3 STREET ADDRESS BLULLANCE DR. 11RAMAR Flovida 33003 CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE Vice Pres, Chrirma LAFAyetta Rolle Sr. CHAIRMAN 2.1 TITLE ☐ Change Addition NAME 2.2 NAME 5417 SW 2445 STREET ADDRESS 23 STREET ADDRESS HOLLYWOOD HA. 33023 CITY-ST-ZIP 2 4 C(TY - ST - Z(P TITLE DELETE Change Addition 3 1 10116 SECRETARY - TREASURER NAME MARIA J. HERNANDEZ 3.2 NAME 2636 OLEANDER DRIVE STREET ADDRESS 3.3 STREET ADDRESS MIRAMAR Florida 3300 CITY - ST- ZIP 3 4. CITY - S1 - ZIP TITLE CHIEF OPERATING OFFICER DELETE 4.1 TITLE Addition NAME EIBARRY ROllE SHIT SW. 23 RD SI 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS Hollywood FlA 33003 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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