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FILED  
Jan 21 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000029512 (5)

1. Corporation Name

CJC PURCHASING, INC.

Principal Place of Business

Mailing Address

4921 SW 154TH PLACE  
MIAMI FL 33185

4921 SW 154TH PLACE  
MIAMI FL 33185

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1997

4. FEI Number

65-0739785

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 8745 N.W. 100TH STREET

Suite, Apt. #, etc.

22 City & State

23 MEDLEY, FLORIDA

Zip

24 33178-1455

Country

25 U.S.A.

2a. Mailing Address

26 8745 N.W. 100TH STREET

Suite, Apt. #, etc.

27 City & State

28 MEDLEY, FLORIDA

Zip

29 33178-1455

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

LEBRIJA, JUAN C  
4921 SW 154TH PLACE  
MIAMI FL 33185

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

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

TITLE D ☐ DELETE

NAME LEBRIJA, JUAN C  
STREET ADDRESS 4921 SW 154TH PLACE  
CITY-ST-ZIP MIAMI FL 33185

TITLE D ☐ DELETE

NAME MUNOZ, CELIA  
STREET ADDRESS 6251 W. 24TH AVE #104  
CITY-ST-ZIP HIALEAH FL 33061

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S ☒ Change ☐ Addition

1.2 NAME LEBRIJA, JUAN C  
1.3 STREET ADDRESS 4921 S.W. 154TH PLACE  
1.4 CITY-ST-ZIP MIAMI, FL 33185

2.1 TITLE D/V/T ☒ Change ☐ Addition

2.2 NAME MUNOZ, CELIA  
2.3 STREET ADDRESS 7001 W. 35TH AVENUE #229  
2.4 CITY-ST-ZIP HIALEAH, FL 33018

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.

SIGNATURE

JUAN C. LEBRIJA

01-08-98

295/295-0111

CR2E034 (10/97)