

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

FILED
May 29 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 # P97000032331
1. Corporation Name:

J & A PRINTING, INC.

Principal Place of Business:

8310 S. River Dr.
Medley, FL 33166

Mailing Address:

8310 S. River Dr.
Medley, FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
April 9, 1997

4. FET Number
65-0753625

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 Suite Apt. #, etc

22 City & State

23 Zip Country

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2a. Mailing Address:

26 Suite Apt. #, etc

27 City & State

28 Zip Country

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9. Name and Address of Current Registered Agent

Alan W. Levine
1110 Brickell Avenue, 7th Floor
Miami, FL 33131

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 of Registered Agent required when transferring)

(Signature of Registered Agent required when transferring)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	Armando Fernandez	8310 S. River Dr.	Medley, FL 33166	☐
S	Caridad Fernandez	8310 S. River Dr.	Medley, FL 33166	☐
				☐
				☐
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
11				☐	☐	☐
12				☐	☐	☐
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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: CARIDAD FERNANDEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8000002541258
-05/29/98--01039--013
***150.00

4/30/98 (305)785-7480

CR2E034 (10/97)