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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000039940

1. Corporation Name

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90101 015 ***163.75

JUHLYN	CORP.								
Principal Place	e of Business	Mailing Address				THE STREET WE SELLE SERVE BEING BERN BERN BENN BERN BERN BERN BERN BERN	F 4 4 1 1 1 1 1 1	EIM IMITA TANK	81811 8811 1881
2210 N.W. 70TH		2210 N.W. 70TH AVE.					•		
SUNRISE FL 33313 SUNRISE FL 33313						DO NOT WRITE IN	THIS S	PACE	
						3. Date Incorporated or Qualifed			
						05/05/1997			
2. Principal P	lace of Business	2a. Mailing Address				1		<u> </u>	<u> </u>
26						65-0749426			
_	Suite, Apt. #, etc. Suite, Apt. #, etc.				era resa	5. Certifcate of Status Desired	<u>~-</u> ~.		
City & Stat	City & State City & State					6. Election Campaign Financing			•
Zip	Country	Zip		гу		8. This corporation owes the current y		ngible	
24	25		30						MAO
	9. Name and Address of Current	Registered Agent	8	1	Name	10. Name and Address of New Kegis	(U) UU A	gent	
FERRO, MADLYN L 2210 N.W. 70TH AVE. SUNRISE FL 33313			Ļ						
			8	2	Street Addre	iss (P.O. Box Number is Not Acceptable)			
			8	3					
}			8	4	City			85 Zip (Code
			, [ļ	•			[]	
l office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State o im familiar with, and accept the obligation	f Florida. Such change was au	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/05/1997 4. FEI Number 65-0749426 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Resonal Property Tax. 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 10. Name and Address of New Registered Agent 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 15 Zip Code 16 Statutes 17 Street Address (P.O. Box Number is Not Acceptable) 18 Addition 19 Street Address (P.O. Box Number is Not Acceptable) 10 Statutes 11 Street Address (P.O. Box Number is Not Acceptable) 11 Street Address (P.O. Box Number is Not Acceptable) 12 Name 13 Street Address (P.O. Box Number is Not Acceptable) 14 Street Address (P.O. Box Number is Not Acceptable) 15 Street Address (P.O. Box Number is Not Acceptable) 16 Street Address (P.O. Box Number is Not Acceptable) 17 Street Address (P.O. Box Number is Not Acceptable) 18 Street Address (P.O. Box Number is Not Acceptable) 19 Street Address (P.O. Box Number is Not Acceptable) 10 Street Address (P.O. Box Number is Not Acceptable) 10 Street Address (P.O. Box Number is Not Acceptable) 11 Street Address (P.O. Box Number is Not Acceptable) 12 Number (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is Not Acceptable) 14 Street Address (P.O. Box Number is Not Acceptable) 15 Street Address (P.O. Box Number is Not Acceptable) 16 Street Address (P.O. Box Number is Not Acceptable) 17 Street Address (P.O. Box Number is Not Acceptable) 18 Street Address (P.O. Box Number is Not Acceptable) 19 Street Address (P.O. Box Number is Not Acceptable) 10 Street Address (P.O. Box Number is Not Acceptable) 10 Street Address (P.O. Box Number is Not Acceptable) 11 Street Address (P.O. Box Number is Not Acceptable) 12 Street Address (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is						
SIGNATURE	Signature, typed or printed name of registered agent		Registered Ag	ent	signature required				
12.	OFFICERS AND					ADDITIONS/CHANGES TO OFFICE	RS AND		
TMLE	DELETE				ĺ			Change	[_] Addition
NAME	FERRO, MADLYN L								
STREET ADDRESS	2210 N.W. 70TH AVE. SUNRISE FL 33313								
CITY-ST-ZIP TITLE	DV DELETE						_	Change	Addition
NAME	FERRO, JORGE		2.2 NAM	E					
STREET ADDRESS					ADDRESS				
- CITY-ST-ZIP	SUNRISE FL 33313		=: 2:4 CITY	-ST	-ZIP	The second secon		<u></u>	<u> </u>
TITLE		☐ DELETE	3.1 TITLE			•		Change	
NAME	}		3.2 NAM	E					
STREET ADDRESS			3.3 STRE	ET/	ADDRESS				
CITY-ST-ZIP			_		-ZIP			Change	☐ Addition
TITLE		☐ DELETE						☐ Change	
NAME					1000500				
STREET ADDRESS	}						-		
CITY-ST-ZIP		☐ DELETE	_	_	- 2114		_	Change	☐ Addition
TITLE	†	□ vereis							
NAME STREET ADDRESS	(ADORESS	•			
STREET ADDRESS			5.4 CiTY		Ī				

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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

(%.13)

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

EZESURED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ Change

Addition