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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000044858 (3)

J.R. INVESTIGATION AGENCY, INC.

Principal Plac		Mailing Address					
2140 MONROE STREET P.O. BOX 6041 #7 HOLLYWOOD FL 33081							
#7 HOLLYWOOD FL 33020		HOLLIWOOD PL 33081				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
D elegate of D	lace of Business	1.0				05/19/1997	
	26. Mailing Address 26. P.O. Box 60	O. BOX 6041			4. FEI Number Applied For X Not Applied For X Not Applied For		
1 /9/6 //ARRISON 5-1 Sulte, Apt #, etc.		Suite, Apt. #, etc.				S8 75 Additional	
2 SUITE 107 City & State		City & State				Certificate of Status Desired Fee Required S. Election Campaign Financing S.00 May Be	
3 HOLLY1	wood Florida	28 HOLLY WOOD		Y.	$dn_{}$	Trust Fund Contribution Added to Fees	
Zip 4] <i>33020</i>	Country	2P A Q I	30 880	ntry	hod	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
4 33020	a. Name and Address of Curren	129 33081	30 774	'W	<u> </u>	Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent	
ON	ATIMA, ERMELINDO			81	Name		
2140 MONROE STREET				82	Stropl Add	el Address (P.O. Box Number is Not Acceptable)	
#7					Street Addi	ress (r. o. box Normber ta Not Acceptable)	
HO	LLYWOOD FL 33020			83			
				84	City	85 Zip Code	
						PL 50 210 2000 PL 5	
SIGNATURE	Signature, typied or printed name of impedimed age OFFICERS ANS	DIRECTORS	13.			red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	DELETE	1.1 T(1		7'	CE PRESIDENT Change DAddition	
NAME	ERMELINDO ONATIVI 2140 MONROE ST	-	1.2 NA		00	TO MONROE SA	
STREET ADDRESS CITY-ST-ZIP	Hollywood FL. 330	20	1.3 51			101141D000d, 71 33020	
ITLE	77-0-7-0-0-7-0-0-7-0-0-7-0-0-0-0-0-0-0-	DELETE	2.1 TIT		- 211	Change Addition	
NAME :			2.2 NA	ME			
TREET ADDRESS			2.3 ST	REET A	ADDRESS		
XIY+30-ZIP	-	The res	2.4 C		I-ZIP		
ITLE .	:	DELETE	3 1 Ti7			Change	
NAME Street adoress			3 2 NA		ADDRESS		
CITY-ST-ZIP			3.3 SI				
ITLE		DELETE	4.1 TO			☐ Change ☐ Addition	
NAME			4. 2 N	AME			
TREET ADORESS			4.3 ST	REET A	ADDRESS		
ITY-ST-ZIP			4.4 CI		- ZIP		
ITLE		☐ DELETE	5 1 717			Change Change	
AME			5.2 NA		+ DDDCCC	1,0	
STREET ADDRESS					ADDRESS	1	
OTY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT		- 201	ChangeAddition	
IAME			6.2 NA			2000025240 Shange Addition -05/14/98-01089-013	
STREET ADDRESS					AODRESS	-05/14/9601089013 ***150.00	
[***100.UU	

14. Thereby 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.

FILED

May 11 1998 8:00am

Secretary of State