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

PROFIT , CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

ANNUAL REPO	. 1		DIVISION	etary.of:State			
DOCUMENT 1. Corporation Name JOHNNY ON THE	•		381				
Principal Place of Business		Mailin	g Address	<u></u>			
12581 BISCAYNE BLVD NORTH MIAMI FL 33181 US		1753 N.E. 178TH STREET NORTH MIAMI BEACH FL 33162					
2. Principal Place of Busine	955	2a. Ma	ailing Address	· · · · · · · · · · · · · · · · · · ·			
21		26					
Suite, Apt. #, etc.	 ,	Su	ite, Apt. #, etc.				
22		27		_ 			
City & State		-	ty & State				
23		28		Country			
Zip	Country	Zij	Ų	Country			
24	25	29		30			

9. Name and Address of Current Registered Agent

FILED Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90221 029 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For

Fee Required **\$5.00** May Be

Added to Fees

☐ Yes

Not Applicable \$8.75 Additional

Ø No.

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

06/23/1997 4. FEI Number

65-0787623

PAND	TIME 7. I EDDOM EVELVM		, Name M	IAR I INEZ Leba	RON EVELY	W
MARTINEZ-LEBRON, EVELYN 1753 N.E. 178TH STREET			82 Street Addr	ess (P.O. Box Number is Not Acces	lable) / /	Į.
			144	ONE ISTRA	. NORTH MI	K+ /11 1.
NUH	ITH MIAMI BEACH FL 33162		83			{
			84 City A		85 Zig C	ode ,
			1 /M1	Ami	FL 337	6/
office or n	to the provisions of Sections 607.0502 and 607.15 egistered agent, or both, in the State of Florida. So m familiar with, and accept the obligations of, Sect	uch change was auth	orized by the corporation	oration submits this statement for the on's board of directors. I hereby acce	e purpose of changing its report the appointment as reg	egistered istered
	in latitudar with, and accept the obligations of, cool		- 0.0			
SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able. (NOTE: Re	gistered Agent signature require		DATE	
12.	OFFICERS AND DIRECTO	RS	13.	ADDITIONS/CHANGES TO O		RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	MARTINEZ LEBRON, EVELYN		1.2 NAME			
STREET ADDRESS	1753 N.E. 178TH STREET		1.3 STREET ADDRESS			RS IN 12 Addition
CITY-ST-ZiP	NORTH MIAMI BEACH FL 33162		1.4 CITY-\$T-ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	☐ Addition
NAME .	LEBRON, JAMES		2.2 NAME			
STREET ADDRESS	AREA ALE ARATU ATRECT		2.3 STREET ADDRESS			
	NORTH MIAMI BEACH FL 33162		2.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	HOTTI WILKIN BEACH TE 00102	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME		•	
STREET ADDRESS	de a fil formando		3.3 STREET ADDRESS	العراب المرابع المرابع المرابع	والمراز المحميون والالا	
			3.4. CITY-ST-ZIP			ĺ
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4.2 NAME			
			4.3 STREET ADDRESS			1
STREET ADDRESS			4.4 CITY-ST-ZIP			}
CITY-ST-ZIP		DELETE	5.1 TITLE		☐ Change	Addition
			5.2 NAME			
NAME .			. 5.3 STREET ADDRESS			j
STREET ADDRESS			5.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		□ DELETE	6.1 TITLE		Change	Addition
			6.2 NAME			
NAME			6.3 STREET ADDRESS			
STREET ADDRESS			6.4 CITY-ST-ZIP			
CITY-ST-ZIP	certify that the information supplied with this filing of	tope not qualify for th		Section 119 07(3)(i) Florida Statutes	. I further certify that the in	formation
indicated officer or	certify that the information supplied with this lilling on this annual report or supplemental annual report of the corporation or the receiver or truste or Block 13 if changed, or on an attachment with a	ort is true and accurate e empowered to exe	te and that my signatur cute this report as requ	e shali have the same legal effect as	ii mage under cairi, that i	am an