02271999-90066-008-\$150.00-\$150.00

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

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

Katherine Harris

Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90066 008 ***150.00

DOCUMENT # P9700060150											
A TRIPLE J ENTERPRISE OF FT. LAUDERDALE, INC.											
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		_									
Principal Place of Business Mailing Address							,	*************			
3318 N.E. 16TH PLACE 3318 N.E. 16TH PLACE							;				
FT LAUDERDALE FL 33305 FT LAUDERDALE FL 33305							DO NOT WRIT	E IN THIS	SPACE		_
						ļ	3. Date Incorporated or Qualifed				
İ							07/09/1997				4
	face of Business	2a. Mailing	Address	10-1-			4. FEI Number		- -	oplied For	4
4833	N.E. 12th Ave.	1201	3 N.E.	IZTN	Ave.		65-0772420			ot Applicable Additional	┥
Suite, Apt.	#, etc.	⊢	Apt. #, etc.			ľ	Certificate of Status Desired		7 - · · -	equired	
22 City 9 Stat		27 City &	State	·			6. Election Campaign Financing		\$5.00	May Be	7
City & Stat	and Park FL	<u> </u>	land Pa	rk FI			Trust Fund Contribution			to Fees	
Zip Oakl	Country	Zip	I and Fa	Country	·		8. This corporation owes the curre	nt year Int	angible		
24 3333	4 25	29 ~3333	3.4	30			Personal Property Tax.		Yes T	- No	4
	9. Name and Address of Current	Registered A	gent	-	- Al		10. Name and Address of New R	egistered	Agent		-
l urn	71 1000			81	Sc	ott	Morowitz				_
VIESTA, JOYCE				82	Street	Addres	s (P.O. Box Number is Not Accepta	ble) -			
3318 N.E. 16TH PLACE FT LAUDERDALE FL 33305						333	N.E. 12th Avenue	3			1
FIL	AUDENDALE IE 3000			83							4
ļ				84	1 A-	le l n	nd Park	FL		Code 3334	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, to office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.					e-named	corpor	ation submits this statement for the	purposa of	changing its	registered	7
office or r	registered agent, or both, in the State of	f Florida, Such	change was au	thorized by da Statules	the corpo	oration'	's board of directors. I hereby accep	t me appoi	ument-as-re	Sustaion	1
1	in jamilar in an accept the congain	dris dr. de	ت سده	/22/	69		_				1
SIGNATURE	Signalus, typed or printed name registered agent				f signature r	required w	from felinatating)	DATE 44	D DIDECT	DDC IN 12	-l ⊗
12.	OFFICERS AND	DIRECTORS	X) DELETE	13, 1,1 MILE			ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition	CR2E034 (11/98)
TITLE	D D		45) DECE IE	1.1 TITLE		Pre			_ `		¥
NAME	VIESTA, JOYCE 3318 N.E. 16TH PLACE				T ADDRESS		tt Morowitz				
STREET ADDRESS	FT LAUDERDALE FL 33305			1.4 CITY-S			3 N.E. 12th Ave		•		_ <u>2</u>
TITLE	FI LAUDENDALE IE 30005		DELETE	21 TITLE			land Park FL 3	7334	☐ Change	☐ Addition	1) 0
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREE	T ADDRESS						
CITY-ST-ZIP				2.4 CITY-5	T ZIP		·			☐ Addition	-
TITLE			DELETE	3.1 TITLE					Change		'}
NAME				3.2 NAME							
STREET ADDRESS				1	TADDRESS						
CUA-SI-ZIA		·	DELETE	3.4. CITY-5	T-ZIP				-f-1Change	Addition	<u> </u>
ππιε		~	·	4.2 NAME		·					1
NAME -				_	TADORESS						
STREET ADDRESS				4.4 CITY-S					<u></u>		
CITY-ST-ZIP			DELETE	5.1 TITLE					Change	Addition	וי
NAME				5.2 NAME					•		
STREET ADDRESS				5.3 STREE	TADORESS		•		•	, ,	
CITY-ST-ZIP				5.4 CITY-S	T- ZIP	<u> </u>			Change	☐ Addis	-1
TITLE		•	☐ DELETE	6.1 TITLE					☐ Change	☐ Addition	`}
NAME				6.2 NAME							{
STREET ADDRESS				B.3 STREE	TADDRESS						1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). 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 ceth; 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.

B.4 CITY-ST-ZIP

SIGNATURS COLE MO FOW ITED ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR