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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🕶

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000069282 (6)

J B J BUSINESS CO.

FILED Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
45 N.E. 68 STREET 45 N.E. 68 ST MIAMI FL 33138 MIAMI FL 3313					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					08/08/1997	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21 26				····	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	7		5. Certificate of Status Desired Service Servi	
City & Stat 23		Cily & State	<u> </u>	···	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible	
24	25	29	30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Curre	nt Hagistereo Agant		B1 Name	10. Name and Address of New Registered Agent	
JOSE, JEAN SERVANDIE				Name		
45 N.E. 68 STREET			[82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33138			ļ	83		
			1			
) 		84 City	FL 85 Zip Code	
11 Purcuant	to the provisions of Sections COT-95	02 and 607 1508. Florida Statute	es the at	ove-named corr		
office or agent. I a	registered agon), or both, in the statement amilia with and action the oblig	of Florida. Such change was a pations of, Section 607.0505, Flo	uthorized orida State	by the corporations.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	The state of the s		- 		2-4-78	
12.	Significative typed as printed name of regis ared ag	ID DIRECTORS	13.	Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	DELETE	1.1] []	LE	Change Addition	
NAME	Jean Servandie	Tono	1.2 NA	ME		
STREET ADDRESS	1 - <u>-</u>			HEET ADDRESS		
CITY-SI-ZIP Miami, Florida 33138				Y-ST-ZIP		
TITLE	HIAMI, FIULIUA	DELETE	2.1 T/1		Change Addition	
NAME			2.2 NA	ME M		
STREET ADDRESS	}		2.3 ST	HEET ADDRESS		
CITY-ST-ZIP			2. 4 Ci	TY-ST-ZIP		
TITLE		DEL ete	3.1 TIT	LE	Change Addition	
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	HEET ADDRESS		
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP		
TITLE		DELETE	4.1 107	LE	☐ Change ☐ Addition	
NAME			4.2 N/	ME		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP			-	Y-ST-ZIP		
TITLE		☐ DELET E	5.1 TIT		☐ Change ☐ Addition	
NAME	1		5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		T ociett	_	Y-ST-ZIP	☐ Change ☐ Addition	
TITLE		DELETE	6.1 111	·	Li change Li Addition	
NAME			6.2 NA			
STREET ADORESS				REET ADDRESS		
CITY-ST-ZIP	partification information associated	with this filling done not a well to		Y-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further certify that the information	

nual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address.