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

P97000071843 (1)

**PROFIT CORPORATION** ANNUAL REPORT

1998

J & F RESTAURANT & LUNCH, INC.

DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## **FILED** Jul 22 1998 8:00am Secretary of State



	·					
Principal Place of Business Mailing Address						ı radırdan sın ranın 16811 darist darih darih darih 1880 i 11881 i 1811 Birda Birih 1881
913 SOUTH (			209 NORTH CENTER STREET			
PIERSON FL	32180	PIERSON FL 321	PIERSON FL 32180			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						08/19/1997
	Place of Business	2a. Mailing Addro	2a. Mailing Address			4, FEI Number Applied For
21 Cuito Ast	# al-	26				59-3463339 Not Applicable
Suite, Apt	#, <del>0</del> (C.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
City & Stat	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Re
23	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zφ	C	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔀 Yes 🗌 No
	9. Name and Address of Curre	ent Registered Agent		-		10. Name and Address of New Registered Agent
	IERILAWYER CHARTERED			81	Name	
343 AUMERIA AVENUE CORAL GABLES FL 33134				82 Street Address (P.O. Box Number is Not Acceptable)		
00	MAL GADLES PL 33134			83		
				00		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the	above	e-named	corporation submits this statement for the surpose of shancing its assistant
ornce or r	egi <b>ste</b> rea agent, or both, in the Stat	le o' Fiorida. Such chanc	ie was authoria	zeď by	the coro	oration's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE						
SIGNATORE	Signature, typed or printed name of registered a		(NOTE Ragisto	ered Ago	nt signature i	ogured when reinstating) DATE
12.		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD IOCE	☐ DEL	:TE 1,1	TITLE		☐ Change ☐ Addition
NAME	GOMEZ, JOSE 913 SOUTH HWY 17			NAME		
STREET ADDRESS	PIERSON FL 32180		1.3	STREET	ADDRESS	
CITY-ST-ZIP TITLE	VD	DEL		CITY-ST	T- <b>Ž</b> IP	
NAME	<b>DE</b> LA SANDRA, FRANCISCA			NAME	İ	Change Addition
STREET ADDRESS	913 SOUTH HWY 17	•			ADDRESS	± .
CITY-ST-ZIP	PIERSON FL 32180		1	4 CITY-S		·
TITLE	•	DEL		TITLE		☐ Change ☐ Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3	STREET .	ADDRESS	
CITY-ST-ZIP				CITY-S	1 - ZIP	
TITLE		☐ DELI	TE 4.1	TITLE		☐ Change ☐ Addition
NAME				2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELI		CITY-ST	- ZIP	
NAME		LJ DEE1		THILE	-	L. Change L Addition
STREET ADDRESS				NAME STOCCT A	ADDRESS	
CITY-\$T-ZIP						•
TITLE	Miles	DELE		CITY-ST THILE	- ZIF	☐ Change ☐ Addition
NAME		—		NAME		- Constant
STREET ADDRESS			6.3	STREET A	ADDRESS	
City-St-Zip			6.4	CITY-ST	-ZIP	
14. I hereby o	ertify that the information supplied v	with this filing does not q	Jalify for the e	xempti	ion 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.						