## 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 #

P97000096556 (0)

JUNE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
924 E SAMPLE ROAD	924 E SAMPLE ROAD
POMPANO FL 33064	POMPANO FL 33064

## **FILED** Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
924 E SAMPLE ROAD POMPANO FL 33064		924 E SAMPLE ROAD POMPANO FL 33064					DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							11/12/1997
2. Principal I	Place of Business	2a. Mailin	g Address				4, FELNumber Applied For
21		26					65-0794937 Not Applicable
i Suite, Apt	. #, etc.	Suite,	Suite, Apt. #, etc.				\$8.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & Sta	ite	City &	City & State				6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	28	· <del></del>				Trust Fund Contribution Added to Fees
24	25 Country	Zip	}	Coun	ıry		8. This corporation owes or has paid the current year Intangible
241	g, Name and Address of Curre	29 ent Registered A	gent [	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	<del></del>			8	31	Name	ID, Italia and Montess of How Hogisteron Monte
	FILINGS, INC.				$\downarrow$		
3732 N.W. 16TH STREET				6	82 Street Address (P.O. Box Number is Not Acceptable)		
·	FT. <b>Lauderd</b> ale FL 33311-413	2		8	33		,
				<u> </u>			
				8	34	City	FL 85 Zip Code
I Office of	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the oblining	e of Florida, Suct	h chande was ai	uthorized	hv t	named corp the corporati	poration submits this statement for the purpose of changing its registered ition's board of directors. I hereby accept the appointment as registered
	arricanimar want, and accept the oran	ganons or, Sectio	III 607 USUS, FIOI	าเนล ธเลเมเ	es.		
SIGNATURE	Signature, typed or printed name of registered as	gent and tille if applicat	te (NOTE:	Registered A	Agent	t signature require	ired when reinstating) DATE
12.	OFFICERS AF	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 TITLE	E		☐ Change ☐ Addition
NAME	JUNEJO, G.			1.2 NAM	ΙE		
STREET ADDRESS	924 E SAMPLE ROAD			1.3 STRE	ET AI	DDRESS	
CITY-ST-ZIP	POMPANO FL 33064		Decemen	1.4 CITY		ZIP	
TITLE			2.1 TITLE			☐ Change ☐ Addition	
NAME CYDEET ADDDGGG				2.2 NAM			
STREET ADDRESS CITY-ST-ZIP				2.3 STRE			
TITLE			DELETE	2. 4 CITY 3.1 TITLE	• -	- ZIP	Change Addition
NAME				3.2 NAM			C cusaige
STREET ADDRESS				3 3 STRE		DDRESS	
CITY-ST-ZIP				3.4. CITY			i
TITLE			DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAM	fE		
STREET ADDRESS				4.3 STRE	1A 13	DDRESS	
CITY-ST-ZIP	<b></b>			4.4 CITY	-\$1-	ZIP	
TITLE			DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAME	E		
STREET ADDRESS				5 3 STRE	ET AC	DDRESS	
CITY-ST-ZIP			- Contract	5.4 City		ZIP	
TITLE			☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREE			}
City-st-zip	certify that the aformation supplied a	vith this filing dos	es not qualify for	6.4 CITY-			Section 119.07(3)(i) Florida Statutos I further cartifu that the information

indicated on this annual keport or supplied will this limit does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the informatio 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 congraft of 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 changes or covariation with an address.