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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000100308

1. Corporation Name

JF EXPRESS INC.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90122 040 ***150.00



Principal Place	of Business .	М	ailing Address				1 ipplight the latti seek mark and an
876 18TH PLACE, S.W.							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
							11/24/1997
A Orinainal Ol	lose of Purinoss	20	, Mailing Address				4. FEI Number Applied For
							59-3493936 Not Applicable
21 26						\$8.75 Additional	
22 27						5. Certificate of Status Desired Fee Required	
			City & State	State			6. Election Campaign Financing S5.00 May Be
23 28			•				Trust Fund Contribution Added to Fees
Zip Country Zip			Zip	Country			8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No
	9. Name and Address of Curre	nt Regis	stered Agent				10. Name and Address of New Registered Agent
					81	Name	
JEAN M. JEAN FRANCOIS 876 18TH PLACE, S.W.				ŀ	82	Street Add	dress (P.O. Box Number is Not Acceptable)
					- ا	Olicocriac	
VER	O BEACH FL 32962			Γ	83		
				-	84	City	85 Zip Code
] 1	FL T
11. Pursuant	to the provisions of Sections 607.05	02 and 6	607.1508, Florida Statu	tes, the ab	ove	e-named cor	rporation submits this statement for the purpose of changing its registered
office or t	egistered agent, or both, in the State m familiar with, and accept the oblig	of Flori	da. Such change was a	authorizea	DV '	tne corporat	tion's board of directors. I hereby accept the appointment as registered
1	m lammar with, and doopt the obig	0.110110 01	,, 00000,, 001,0000, 11				
SIGNATURE	Signature, typed or printed name of registered ag	ent and title	if applicable. (NOT	E: Registered	Agen	nt signature requi	ired when reinstating) DATE
12.	OFFICERS A	ND DIRE	ECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			1.1 TITI	E		☐ Change ☐ Addition	
NAME	JEAN M. JEAN FRANCOIS 1.2 N		1.2 NA	1.2 NAME			
STREET ADDRESS	876 18TH PLACE, S.W.			1.3 STF	REET	ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32962			1.4 CIT	Y-\$1	T-ZIP	
TITLE			☐ DELETE	2.1 TIT	LΕ		☐ Change ☐ Addition
NAME				2.2 NA	ME		
STREET ADDRESS				2.3 STF	REET	TADORESS	
CiTY-ST-ZiP				2. 4 CF	Y-S	6T-23P	
TITLE		_	☐ DELETE	3.1 111	LE		☐ Change ☐ Addition
NAME				3.2 NA	ME		
STREET ADDRESS				3.3 STI	REET	T ADDRESS	
CITY-ST-ZIP				3.4. CI	ry-s	ST- ZIP	
TITLE			☐ DELETE	4.1 TIT	LE		☐ Change ☐ Addition
NAME				4.2 NA	ME		
STREET ADDRESS				4.3 STI	REET	T ADDRESS	
CITY-ST-ZIP				4.4 CIT			
TITLE			☐ DELETE	5.1 TIT			Change Addition
NAME				5.2 NA	ME		
STREET ADDRESS				5.3 STI	REET	T ADDRESS	
CITY-ST-ZIP				5.4 CIT	Y-Si	T-ZIP	
TITLE		_	□ DELETE	6.1 111	LE		☐ Change ☐ Addition
NAME			oo. **	6.2 NA	ME		
(ASSAULT						TADORESS	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption 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 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE ZELLUIRED SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR