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

PROFIT CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000106610 (3)

J. & E. FERNANDEZ, INC.

**FILED** Feb 17 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address   |   |                        |               |   |                    |  |               |   |
|---|---|------------------------|---------------|---|--------------------|--|---------------|---|
| 8602 VIVIAN BASS WAY<br>ODESSA FL 33556   |   |                        |               | 8602 VIVIAN BASS WAY<br>ODESSA FL 33556 |                    |  |               | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified                 |
| 1   |   |                        |               |   |                    |  |               | 12/18/1997  |
| 2. Principal f  | Place of Busin                                | ness                   | 2a.           | 2a. Mailing Address                     |                    |  |               | 4. FEI Number Applied For   |
| 21  |   |                        |               | 26                                      |                    |  |               | 54.32 A Not Applicable  |
| Suite, Apt. #, etc.   |   |                        |               | Suite, Apt. #, etc.                     |                    |  |               | 5. Certificate of Status Desired See Regulred Fee Regulred                    |
| City & State  |   |                        |               | City & State                            |                    |  |               |   |
| 23  |   |                        |               | 28                                      |                    |  |               | B. Election Campaign Financing     Trust Fund Contribution     Added to Fees  |
| Zip   | Zip Country                                   |                        |               | Zip Country                             |                    |  | y             | 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 Current Registered Agent   |   |                        |               |   |                    | 1=   | T             | 10. Name and Address of New Registered Agent                                  |
|   | rnandez,                                      |                        |               |   |                    | 81   | Name          |   |
|   | 02 VIVIAN E                                   |                        |               |   |                    | 82   | Street Ad     | ldress (P.O. Box Number is Not Acceptable) .                                  |
| j Ol  | DESSA FL 3                                    |                        |               |   | 83                 | <del>                                     </del> |               |   |
|   |   |                        |               |   |                    | L  |               |   |
|   |   |                        |               |   |                    | 84   | City          | FL 85 Zip Code  |
| 11. Pursuant  | to the provis                                 | ions of Sections 607.0 | 502 and 6     | 07.1508, Florida Stat                   | utes, the a        | abov   | e-named co    | orporation submits this statement for the purpose of changing its registered  |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation'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   |   |                        |               |   |                    |  |               |   |
| 40  |   |                        |               |   |                    |  |               |   |
| 12.   | <u> </u>                                      | OFFICERS :             | NAD DIREC     | DELETE                                  |                    | ITLE   |               | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition            |
| NAME  | •   | IDEZ, JOSE R           |               |   |                    | NAME   | -             |   |
| STREET ADDRESS  | AAAA 1.01.01.11.01.01.01.01.01.01.01.01.01.01 |                        |               |   |                    |  | ADDRESS       |   |
| CITY-ST-ZIP   | ADEAGL EL AREEA                               |                        |               |   |                    |  | ST - ZIP      |   |
| TITLE   | D   |                        |               | DELETE                                  | 217                |  | <del> </del>  | Change Addition   |
| NAME  | FERNAN  | idez, estrella M       | 1             |   | 2.2 6              | IAME   |               |   |
| STREET ADDRESS  |   | vian bass way          | AY            |   |                    | 2.3 STREET ADDRESS                               |               |   |
| CITY-ST-ZIP   | ODESS/  | A FL 33556             |               |   | 2 4                | CITY-  | ST-ZIP        |   |
| TITLE   |   |                        |               | DELETE                                  | 311                | †TLE   |               | Change Addition   |
| NAME  |   |                        |               |   | 3.2 N              |  |               |   |
| STREET ADDRESS  |   |                        |               |   | 3 3 STREET ADDRESS |  |               |   |
| CITY-ST-ZIP   |   |                        |               |   |                    |  | ST-ZIP        | Channe Addition   |
| TITLE   |   |                        |               | L Deteit                                | 4.1 T              | IILE<br>NAME                                     |               | L. Change L. Addition   |
| NAME<br>OTRECT ADDRESS  |   |                        |               |   |                    |  | ADDRESS       |   |
| STREET ADDRESS CITY-ST-ZIP  |   |                        |               | 4.4 C                                   |                    |  | 1             |   |
| TITLE   | ·   |                        |               | DELETE 5.1 T                            |                    |  | 01-21         | Change Addition   |
| NAME  |   |                        |               |   | 5.2 NAME           |  |               |   |
| STREET ADDRESS  |   |                        |               |   |                    |  | ADDRESS       |   |
| CITY-ST-ZIP   |   |                        |               |   |                    |  | ST-ZIP        |   |
| TITLE   |   |                        |               | ☐ DELETE                                | 6.1 T              |  |               | Change Addition   |
| NAME  |   |                        |               |   | 6.2 N              | IAME   |               |   |
| STREET ADDRESS  |   |                        |               |   | 6.3 S              | TREET  | ADDRESS       |   |
| CITY-\$T-ZIP  | L   |                        |               |   |                    |  | T-ZIP         |   |
| 14   hereby (   | cartify that the                              | a intormation cupolide | Lwith this ti | ling door not guelitu.                  | for the ev         | OFTEN  | u hotete ooit | n Section 119 07(3Vi) Florida Statutas I further certify that the information |

Instead certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the informatio indicated on this annual report or supplemental annual report is the 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 bustee amplowered 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.

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(813)921- B20