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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90056 033 \*\*\*150.00

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DOCLIMENT #	D000000117E0	

DOCUMENT # FAROOOT 1-1-4-20 1. Corporation Name J & G GROUP, INC. Mailing Address Principal Place of Business 9304 LONGSTONE COURT 9304 LONGSTONE COURT TAMPA FL 33615-1669 TAMPA FL 33615-1669 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/05/1998 Applied For 2. Principal Place of Business 2a. Mailing Address 59-349 1021 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Added to Fees Trust Fund Contribution 28 23 Country Zip 8. This corporation owes the current year Intangible Zip Country **⊠**No Personal Property Tax. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **AMERILAWYER** 82 Street Address (P.O. Box Number is Not Acceptable) **343 ALMERIA AVENUE** CORAL GABLES FL 33134 83 Zip Code 85 84 City 11: Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CESENSA (11/9R) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. Change DELETE 1.1 TITLE TITL F CARRANZA, JUAN M 1.2 NAME NAME 9304 LONGSTONE COURT 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33615-1669 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 21 TITLE Change TITLE 2.2 NAME CARRANZA, GENOVEVA E NAME 9304 LONGSTONE COURT 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33615-1669 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS Speed proper into 3.4. CITY-ST-ZiP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition **∏** DELETE Change 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

**SIGNATURE** 

CITY+ST-ZIP

STREET ADDRESS

TILE

NAME

MANUREAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TE DELETE

813-24971)5

8/3-2497/7.

Daytime Phone #

Change Addition