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 # P98000045307

1. Corporation Name

J & C PETROLEUM, INC.

Principal Place of Business

FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90088 024 ***158.75



Principal Place	e of Business	Mailing Address		1,00,000		
20121 NORTHWEST 84TH AVENUE HIALEAH FL 33012		20121 NORTHWEST 84TH AVENUE HIALEAH FL 33012				
				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				05/20/1998		
2. Principal Pl	ace of Business	2a, Mailing Address		4 FEI Number	Aρ	plied For
21		26		65-0847252	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 /	Additional
22		27		5. Certifcate of Status Desired	Fee Re	quired
City & State	9	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	Added t	
Žip	Country	Zip	Country	8. This corporation owes the current year In		
24	25		30	Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	ent Registered Agent	94 Name	10. Name and Address of New Registered	1 Agent	
AMERILAWYER			81 Name J	Imes ferez		
	ALMERIA AVENUE			ress (P.O. Box Number is Mot Acceptable)		
CORAL GABLES FL 33134			20121	NW 87 - HOC		_
0011	AE CADLES I E 30 134		83			
			84 City / 1	loah FI	85 Zip (Code Z
			Ba	leah FI		
11. Pursuant office or re	to the provisions of Sections 507.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Frontia. Such change was au attitude. Section 607.0505, Flori	s, the above-named corp thorized by the corporation da Statutes.	oration submits this statement for the purpose con's board of directors. I hereby accept the appears	ointment as re	gistered
SIGNATURE	(Aris	UK.		•		
,, , , ,		gent and title if applicable. (NOTE:	Registered Agent signature require			
12. 😽		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD .	☐ DELETE	1.1 TITLE		Change	☐ Addition
NAME	PEREZ, JAMES		1.2 NAME			
STREET ADDRESS	20121 NORTHWEST 84TH AV	/ENUE	1.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CITY-ST-ZIP			
TITLE	STD	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	PEREZ, MARIA A	·=• 41 ·=	2.2 NAME			
STREET ADDRESS	20121 NORTHWEST 84TH A	/ENUE	2.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33012		2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	Addition Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	-	☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CfTY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 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 changes or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR