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**

1999 DOCUMENT # P98000075068

1. Corporation Name J & B FINANCIAL CORPORATION Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90040 042 ***150.00



· · · · · · · · · · · · · · · · · · ·							
Principal Place	of Business	Mailing Address				1,000	
18256 MEDITER	RANEAN BOULEVARD	18256 MEDITERRANEAN BO	56 MEDITERRANEAN BOULEVARD				
SUITE 1405		SUITE 1405					
MIAMI FL 33015	ı	MIAMI FL 33015				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
	and the same of the same					08/27/1998	
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
21		26				(25 - 08(3/48) Not Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Paguired	
22		27				5. Certificate of Status Desired Fee Required	
City & State	3	City & State				6. Election Campaign Financing S5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip				ntry		8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax.	
	9. Name and Address of Current	11				10. Name and Address of New Registered Agent	
g. Halle and regions of our residence regions					Name		
LAVENIA, WILLIAM V							
	6 MEDITERRANEAN BOULEVARD)	82		Street Address (P.O. Box Number is Not Acceptable)		
	E 1405			83			
	II FL 33015			03			
IVIIA	II 1 E 55015		Ì	84	City	85 Zip Code	
	ي ماهو د				•	FL U Pross	
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.							
3/65/99							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
12.	OFFICERS ANI	DIRECTORS	-13.		₌]	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TIT	LE		Jack Brigagliv Secretary of Treasure Change Addition 18256 Mediterranear Blvd. Ste 1401- Mirmi, Fl. 37015	
NAME	LAVENIA, WILLIAM V 1.			ME		of the country of the	
STREET ADORESS	18256 MEDITERRANEAN BOUL	EVARD	1.3 ST	REET.	ADDRESS	18256 Mediterranoaris IV 8. Ste 1401	
CITY-ST-ZIP	MIAMI FL 33015		1.4 CIT	Y-ST	-71P	Miumi F1 27015	
TITLE		☐ DELETE	2.1 TIT			Change Addition	
			2.2 NA	ME			
× 1 2	j. 3 1				ADDRESS		
STREET ADDRESS	The second second				- 1		
CITY-ST-ZIP	- · · · · · · · · · · · · · · · · · · ·	☐ DELETE	2.4 CI		1-ZIP	Change Addition	
TITLE	•	☐ DELETE	3.1 TIT				
NAME			3.2 NA	–			
STREET ADDRESS	DDRESS		3.3 ST	3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CI	TY-ST	-ZIP		
₹ITLE	•	☐ DELETE	4.1 TIT	LΕ		Change Addition	
NAME			4. 2 N	ME			
STREET ADDRESS			4.3 ST	REET.	ADDRESS		
CITY-ST-ZIP			4.4 CIT	TY-ST	-ZiP		
TITLE			_	1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NA				
STREET ADDRESS			,5.3 ST	REET.	ADDRESS		
			5.4 CiT				
CITY-ST-ZIP		☐ DELETE	6.1 TIT			☐ Change ☐ Addition	
TITLE			6.2 NA				
NAME					ADDRESS		
I OTDEET ADADECC			0.35	KELL.	MUUNEOO [

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP