

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S14563

1. Corporation Name

~~J.A.F. GUNSMITHING, INC.~~
J.A.F. TECH, INC.

(8)

NC
2-16-96
AEP



Principal Place of Business

6425 SW 50TH ST.
MIAMI FL 33155

Mailing Address

6425 SW 50TH ST.
MIAMI FL 33155

2. Principal Place of Business

21 4524 S.W. 71st Av.

2a. Mailing Address

26 4524 S.W. 71st Av.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22
City, State
MIAMI, FL

27
City, State
MIAMI, FL

23
Zip
33155

24
Country
DADE

28
Zip
33155

29
Country
DADE

3. Date Incorporated or Qualified
11/13/1990

3a. Date of Last Report
03/15/1995

4. FEI Number
65-0231425

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FERNANDEZ, JOSE ANTONIO
6425 SW 50TH ST.
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of registered agent, officer, director, or authorized representative

Signature of Secretary of State or authorized representative

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME FERNANDEZ, JOSE ANTONIO
STREET ADDRESS 6425 SW 50TH ST.
CITY-STATE-ZIP MIAMI FL ☐ DELETE

TITLE D
NAME FERNANDEZ, MARIA PANTIN
STREET ADDRESS 6425 SW 50TH ST.
CITY-STATE-ZIP MIAMI FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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-04/29/96--01062--029
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement to 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/96 (305) 662-9407
4-28-96

CR2E034 (12/95)