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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$46978

(0)

Mailing Address

JBR CORPORATION, INC.

Principal Place of Business

FILED May 07 1997 8:00am Secretary of State



	DADELAND BOULEVARD DATRAN CENTER 8	6772 W. FLAGER ST. Miami FL 33144-2946 US		•			
US				1	3. Date Incorporated or Qualified 04/19/1991	3a. Date of L 10/14/19	
	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21		26					Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	Count 30	ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		
	9, Name and Address of Cui	rent Registered Agent			10. Name and Address of New Reg	Istered Agent	
SIXT	O, HAYDEE		8	1 Name			Į
6778 W. FLAGLER STREET MIAMI FL 33144				2 Street Add	ress (P.O. Box Number is Not Acceptable	e)	
HIFW	WII 1 C 00 144		8	3			
			8	4 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, typed or printed name of registerer	Egenery and the it applicable. (NO	H: Registered A	gent signature requ	ired when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	TORS IN 12
TITLE	VD	DELETE	1.1 111(6			☐ Cha	inge Addition
NAME	CRUZ, ROBERTO		1.2 NAM	-			
STREET ADDRESS	3501 W. FLAGLER ST.	1.00		ET ADDRESS			
CITY-ST-ZIP	MIAMI FL		14 CITY	S1-ZIF			
TITLE	PD	☐ DELETÉ	2.1 1111.6			☐ Cha	ange 🗀 Addition
NAME	SIXTO, HAYDEE		2 2 NAM				
STREET ADDRESS	3501 W. FLAGLER ST.		2 3 STRE	FT ADDRESS			
CITY-ST-ZIP	MIAMI FL TD	Distre	2. 4 CHY			Па	[A449/
TITLE	CRUZ, ROSE MARIE			ì		Cha	inge L_ Addition
NAME Street address	3501 W. FLAGLER ST.		3.2 NAM				
CITY-ST-ZIP	MIAMI FL		3.3 STRE 3.4 CITY	E1 ADDRESS			İ
TITLE	SO	DELETE	4.1 1111.5			Cha	noe Addition
NAME	RODRIQUEZ, HAYDELY		4. 2 NAM				
STREET ADDRESS	6778 W. FLAGLER ST.			ET ADDRESS			İ
CITY-ST-ZIP	MIAMI FL 33144	0144		ST-ZIP			Ì
TITLE		☐ DELETE	5.1 TITLE			Cha	inge [] Addition
NAME			5.2 NAM	F			
STREET ADDRESS			5 3 STRE	FT ADDRESS			
CITY-ST-ZIP			5.4 DITY	ST-ZIP			
TITLE		DELETE	6.1 TITLE			☐ Cha	nge Addition
NAME			6.2 NAM	·			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP		600 CO	6.4 CITY	- ST - 7(P			

I do 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 eath; 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.