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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

**FILED** May 01 1996 8:00 am Secretary of State

JOE JAY & JELS INVESTMENTS, INC. i ledijek in ekolojik dala ikes iki alio ekok olik juri ili ili

Principal Place of Business Mailing Address **5340 QUEEN LAKE TERRACE** 5340 QUEEN LAKE TERRACE DAVIE FL 33331 DAVIE FL 33331 3. Date Incorporated or Qualified 3a. Date of Last Report 07/19/1991 06/15/1995 2. Principal Place of Business 2a. Mailino Address 4. FEI Number Applied For 21 26 65-0271789 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required City & State Oity & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country  $Z_{10}$ Country 8. This corporation has liability for intangible tax under s. 199,032, 24 25 29 30 Florida Statutes **Ø** Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BUSH, JAMES N. 82 Street Address (P.O. Box Number is Not Acceptable) 633 S. ANDREWS AVENUE 3RD FLOOR 83 FORT LAUDERDALE FL 33301 84 City 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Signature, typical or protect name of requirement agreet a unit to a account of EA10 (12/95)12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELF IL 1.111.8 ☐ Change ☐ Addition GEORGE, C.K. NAME 1.2 NAME CR2E034 5340 QUEEN LAKE TERRACE STREET ADDRESS 13 STHEET ADDRESS DAVIE FL CITY-SI-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2 1 HILE ☐ Change Addition GEORGE, GRACY NAME 2.2 NAME **5340 QUEEN LAKE TERRACE** STREET ADDRESS 2.3 STREET ADDRESS DAVIE FL CITY-ST-7IP 2.4 CITY - ST - ZIP TITLE ☐ DELETE 3 1 THEE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - S7 - 71P TITLE DELETE 4 1 ft/LE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-\$1 - ZIF TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIF TITLE DELETE 6 1 THE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. To hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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 oa an attachment with an address.

6.4 C:TY - ST - ZIP

SIGNATURE:

B

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