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 # **S71202** **(3)**

1. Corporation Name
JMC ENTERPRISES OF SOUTH FLORIDA, INC.

Principal Place of Business
P.O. BOX 4388
FT LAUDERDALE FL 33338

Mailing Address
P.O. BOX 4388
FT LAUDERDALE FL 33338

3. Date Incorporated or Qualified: 08/06/1991
3a. Date of Last Report: 05/10/1995

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 65-0281551 ☐ 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

CABRAL, JOSEPH M.
1061 NW 74TH WAY
PLANTATION FL 33313

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 9003 W. Sunrise Blvd.
83
84 City Plantation FL 85 Zip Code 33322

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 Joseph M Cabral, President Joseph M Cabral President 8/17/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	SPDT	☐ DELETE
NAME	CABRAL, JOSEPH M.	
STREET ADDRESS	1061NW 74TH WAY	
CITY-ST-ZIP	PLANTATION FL	
TITLE	VP	☒ DELETE
NAME	BETTENCOURT, AGOSTINO	
STREET ADDRESS	7561 MADEIRA COURT	
CITY-ST-ZIP	MIRAMAR FL	
TITLE	VP	☒ DELETE
NAME	BETTENCOURT, CARLOS	
STREET ADDRESS	6441 SW 18TH ST	
CITY-ST-ZIP	MIRAMAR FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SPDT	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	9003 W. Sunrise Blvd	
1.4 CITY-ST-ZIP	Plantation, FL 33322	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 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.

SIGNATURE: Joseph M Cabral, President 8/17/96 (954) 566-2442
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Joseph M Cabral President