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 # \$72529

JOFAY, INC.

(8)

FILED Mar 19 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address			i ibbitata ist famen tinne mitte edit athir ainte neut minte ment minte ment and t				
C/O STANLEY L. STONE CPA. PA 5161 COLLINS AVE. # 1111 MIAMI BEACH FL 33140		5161 COLLINS AVE.	C/O STANLEY L. STONE CPA PA 5161 COLLINS AVE. # 1111 MIAMI BEACH FL 33140-2721							
HINNI PERVIT					3. Date Inc 08/12/	orporated or Qualified 1991	3a. Da 04/3	le of Last F 30/1996	Report	
2. Principal P	ace of Business	2a, Mailing Address 26			4, FEI Num 65-02	⁵ 77 390			oplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, eld			5. Certifica	te of Status Desired			Additiona! equired	
City & State		City & State	·····			Campaign Financing nd Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25	Zip [29]	30	ntry	8. This corp	poration has liability fo	r intangible		. 199.032,	
<u>***;</u>	9. Name and Address of Curre					nd Address of New F	legistered /	gent		
OTO	NE, STANLEY			81 Name						
	LOOLUNG TWENT THE			82 Street	Address (P.O. Box N	lumber is Not Acdept	able)	+ 0	y /	
	# FE-33131 =			11	410 So.	OCEAN	ૐ ર	1 0	06	
				83						
				84 City	Howyw	eas	FL	1 3	Code 019	
11. Pursuant office or ragent I a	to the provisions of Sections 607.00 egistered agout, or both, in the Stat m familiar with) and accept the obli	02 and 607.1598 Florida S le of Florida Such change gations of Section 617.050	Statutes, the at was authorized 5, Florida Stat	nove-named d by the cor utes.	corporation submits poration's board of c	this statement for the firectors. I hereby acc	purpose of ept the app	changing i	ts registered registered	
SIGNATURE	Ngnature, typed or plinted nature of registered a	ger any title if applicable	<u>ب</u>		e required when reinstating)		DAY.	26/9	7	
12.		ND DRECTORS	13.		ADDITION	IS/CHANGES TO OFF	ICERS AND			
TITLE	POST SCHAFFER, MOSES JOSEPH	DELETI						Change	Addition	
NAME OTOGET ADODESS	225 CHABANEL ST. W. 11TI		1.2 N/							
STREET ADDRESS	MONTREAL, QUE H201-209	H2N2C9		REET ADORESS TY - ST - ZIP						
CITY-ST-ZIP TITLE	MALLINE IN SAF LICE CO.	DELET			 			Change	Addition	
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NAME			6.2 N							
STREET ADDRESS				REET ADDRESS						
CITY - ST - ZIP			■ 6.4 CI	1Y - S1 - ZIP	1					

14. 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 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, over an attachment with an address. - 1997