

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

FILED

Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S91004 (9)
1. Corporation Name
J & A OF KEY WEST, INC.

Principal Place of Business
501 DUVAL ST.
KEY WEST FL 33040

Mailing Address
501 DUVAL ST.
KEY WEST FL 33040-6552

3. Date Incorporated or Qualified 10/30/1991	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0309106	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	
10. Name and Address of New Registered Agent	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

MORDECHAI, ARAZI
329 DUVAL ST
KEY WEST FL 33040

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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. 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 registered agent and third applicant

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
NAME	MODECHAI, ARAZI	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
STREET ADDRESS	329 DURAL ST	2.1 TITLE	2.2 NAME
CITY-ST-ZIP	KEY WEST FL	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE		3.1 TITLE	3.2 NAME
NAME		3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
STREET ADDRESS		4.1 TITLE	4.2 NAME
CITY-ST-ZIP		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE		5.1 TITLE	5.2 NAME
NAME		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
STREET ADDRESS		6.1 TITLE	6.2 NAME
CITY-ST-ZIP		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

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***150.00

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. 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 THE NEW REGISTER NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Register-Printed

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DOCUMENT # S91004 (9) 1. Corporation Name J & A OF KEY WEST, INC.					
Principal Place of Business 501 DUVAL ST. KEY WEST FL 33040		Mailing Address 501 DUVAL ST. KEY WEST FL 33040-6552			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 10/30/1991 3a. Date of Last Report 05/01/1996	
24		25		4. FEI Number 65-0309106 Applied For Not Applies	
26		27		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
28		29		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
30		31		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent MORDECHAI, ARAZI 329 DUVAL ST KEY WEST FL 33040			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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE ☐ Change ☐ Add					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE ☐ Change ☐ Add					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE ☐ Change ☐ Add					
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SIGNATURE: _____ 1/15/98					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					