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 # V17084

information indicated on this annual recor

(7)

J & M FOOD CORP.

Principal Place of Business 3483 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 Mailing Address

3483 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442-9422

FILED Apr 11 1997 8:00am Secretary of State



| Section (Exp. Section 12 49) | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
|---|--|---|---|---|--|
| | | | 3. Date Incorporated or Qualified | 3a, Date of Last Report | |
| | | | 02/27/1992 | 04/15/1996 | |
| 2. Principal Place of Business | 2a, Mailing Address | (. 6) () | 4. FEI Number | Applied For | |
| 21 Den Pull sole | 26 3487 WHIL | <u>cd 12950</u> | 65-0316632 | Not Applicable | |
| Suite, Apt #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23) new Pull Fl. | 28 | | Trust Fund Contribution | Added to Fees | |
| Zip Country 1 | Zip | Country | 8. This corporation has liability fo | ~~~~ | |
| 24 33442 25 Bronnow | 29 | 30 | , , | Yes No | |
| g. Name and Address of Curren | | | 10. Name and Address of New R | | |
| ABOUKHOUZAM, JIHAD 81 Namo \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | |
| | | | NOU | | |
| l | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| DEERFIELD BEACH FL 33442 | | | 83 | | |
| | | 103 | | İ | |
| | | 84 City | ************************************** | FL 85 Zip Code | |
| 11. Pursuant to the provisions of Sections 607.050 | 2 and 607, 1508, Florida Statut | es, the above-named co | progration submits this statement for the | | |
| 11. Pursuant to the provisions of Sections 607.050 1 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligi | of Florida. Such change was a ations of, Section 607.0505, Fi | authorized by the corpor orida Statutes. | ration's board of directors. I hereby according | opt the appointment as registered | |
| SIGNATURE Signature, typed or pointed name of registereo age | of and title if applicable. (NOT | E: Flogistered Agent signature rec | ouired when teinstaling) | DATE | |
| 12. OFFICERS AN | D DIRECTORS | 13. | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 | |
| THLE PS | DELETE | 1.1 TITLE | | 1 Sec. Change Addition | |
| NAME ABOUKHOUZAM, JIHAD | • • • | 1.2 NAME | BOKENTA SIN | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | |
| STHELT ADDRESS 3483 W. HILLSBORO BLVD. | | | 3483 W. Hillsboro | a Pirel | |
| 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | 3 1.5 | Naudilla Pagal | 1 | |
| | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | Decigion Beach, F | 1\10 \ \ Change \ \ Addition | |
| , | ✓ Notice | | Bolkzam, Scham, | / V.I. | |
| NAME (ABOUKHOUZAM, MANWA | | 2.2 NAME | 3483 W. Hillsbore | s Bluet | |
| STREET ADDRESS 3483 W. HILLSBORD BLVD. | | 2.3 STREET ADDRESS | R Lala A 1 | ~ 1 | |
| CITY-ST-ZIP DEERFIELD BEACH FL | / | 2. 4 CITY-ST-ZIP | Deer held Beach, 1 | <u>- [</u> | |
| THLE | DELETE | 3.1 TITLE | J | Change Addition | |
| NAME BOKZAM, SIHANO | | 3.2 NAME | | | |
| STREET ADDRESS 3483 W. HILLSBORO BLVD. | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP DEERFIELD BEACH FL | | 3.4. CITY-ST-ZIP | | j | |
| TITLE | DELETE | 4,1 TITLE | | Change Addition | |
| NAMÉ | | 4.2 NAME | | $\sim l_{\alpha}$. $\alpha \sim 1$ | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | (-4K.,1)M | |
| | | | | (////// / | |
| C(IY-SI-ZIP | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE | | ☐ Change ☐ Addition | |
| TITLE | <u> </u> | 1 | | C Change C Modition | |
| NAME | | 5.2 NAME | والمراف والمستحد والمعتمد والمراجع المراجع | | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | | | |
| City-St-7IP | | 5.4 CITY - ST - ZIP | | | |
| TITLE | ☐ DELETE | 6.1 TITLE | ~1 ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | Change Addition | |
| NAME | | 6.2 NAME | 70000214 -04/11/97010 | キレス*** ! 100010 | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | 130013 | |
| CITY-S1-ZIF | | 6.4 City - St - ZIP | ***165.00 | | |
| 14 I do hereby certify that the information supplies | d with this filing does not qualit | | ted in Section 119 07(3)(i) Florida Statul | es I further certify that the | |

Applemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the receiver or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name by an attachment with an address.