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 # V31907

(1)

J & L GROUP, INC.

Principal Place of Business

9188 PINE SPRING DRIVE BOCA RATON FL \$3428 US Mailing Address

9188 PINE SPRING DR BOCA RATON FL 33428-1457 FILED Aug 21 1997 8:00am Secretary of State

3a. Date of Last Report

05/01/1996



3, Date Incorporated or Qualified

04/24/1992

2. Principal P	lace of Business	2a. Mailing Address		6	4. FEI Number		IΔn	plied For
21 9300	D KETAY GRUE	26. Mailing Address 26. 9300 KET	AYC	YRCLE	65-0330450			Applicable
Suite, Apt.		Suite, Apt. #, etc.	7		5. Certificate of Status Desired	×	\$8.75 / Fee Re	
City & State 23 PO C		City & State 28 BOCA RA	TON		6. Election Campaign Financing Trust Fund Contribution) X	\$5.00 Added t	
Zip 24 334		Zip 29 33428	Countr	š 4 ·	This corporation has liability Florida Statutes	Yes 2	S No	199.032,
	g. Name and Address of Current	10. Name and Address of New Registered Agent						
903	AVEZ, LUIS L 8 PINE SPRINGS DR CA RATON FL 33428		81 Name CHAVEZ LUÍS L. 82 Street Address (P.O. Box Number is Not Acceptable) 9300 KETAY CIRCLE					
		83	83 BOCA RATON					
		84	130	CA RATON	FL	85 Zip (4.28	
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 raminar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE						3/	7/97.	
	Signature, typed or printed name of registered agent	· · · · · · · · · · · · · · · · · · ·		ont signature require		DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	D '	☐ DELETE	1.1 TITLE	D	فيستدي		M Change	☐ Addition
NAME	CHAVEZ, LUIS L		1.2 NAME		AVEZ LUIS L.			l;
STREET ADDRESS	9188 PINE SPRINGS DR		1.3 STREE	T ADDRESS 93	00 KETAY CIRCLE	î		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-	ST-ZIP	DCA RATON			[2
TITLE	VS	☐ DELETE	2.1 TITLE	VS	8		Change	Addition C
NAME	CHAVEZ, JOSEFINA I		2.2 NAME	CH	AYEZ, JOSEFINA	I		
STREET ADDRESS	9188 PINE SPRINGS DR		2.3 STREE	TADDRESS 93	DO KETAY CIRCU	4		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-		CA RAYON, FL	•		
TITLE		DELETE	3.1 TITLE	177			Change .	Addition
NAME	CHAVEZ, BENJAMIN		3.2 NAME	ĊН	AUEZ, BENJAMI	1	_ ,	
STREET ADDRESS	9188 PINE SPRINGS DR		3.3 STREE	T ADDRESS A 3	OD KETAY CIRCLE	. .		
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY -	ST. 7/D	CA RATON, FL	ت _		
TITLE		DELETE	4.1 TITLE	31-211	CAT PATIENT, PE		Change	Addition
NAME			4. 2 NAME				Onlings	
STREET ADDRESS	•			T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	1				
TITLE		☐ DELETE	5.1 TITLE	ol-Zir			Change	Addition
NAME			5.2 NAME	l			Onange	
STREET ADDRESS			5.3 STREE	F ADDRESS				
CITY-ST-ZIP			5.4 CITY-1					
TITLE	DELETE 61 TITE			Ln			Change	Addition
NAME		_	6.2 NAME					
STREET ADDRESS			6.3 STREE	Annotese				
CITY-ST-ZIP								
14. I do hereb	v certify that the information supplied v	vith this filing does not qualify	6.4 CITY-5	emption stated	in Section 119 07/3/ii) Florida State	itae I further	cortifu that +	ho
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), Fiorida Statutes. I further certify that the information indicated on this annual report or supplierently langual 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 frystee employered 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 enjettachnifer, with an address.								