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

PROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V35979

(6)

J INDUSTRIES, INC.

Principal	Place	nf	Business
rinopa	1 1000	٠.	COO! IOOO

Mailing Address

## **FILED** Apr 29 1997 8:00am Secretary of State

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18240 6W 102 MIAMI FL 8316		13240 SW 102ND ST MIAM! FL 33186-2824						
					3. Date Incorporated or Qualified 05/14/1992	3a. Date of Last Re 05/01/1996	eporl	
2. Principal P	lace of Business	28. Mailing Address		4. FEI Number		plied For		
21		26			65-0333641	<b></b>	1 Applicable	
	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 /	dditional		
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	<b>Z</b> ip	Count	гу	8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30					
	9. Name and Address of Currer	nt Registered Agent		1 Name	10. Name and Address of New Reg	listered Agent		
	ITER, MITCHELL J.		6	Name				
6950 N KENDALL DR 2ND FLOOR			8:		dress (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33156		8:	3				
			8			FL 85 Zip (		
11. Pursuant office or reagent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the abo authorized t orida Statuti	ve-named cor by the corpora es.	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing it the appointment as	s registered registered	
SIGNATURE	Signature, typod or printed name of registered ag-		E Registered A	gent signalure requ	uired when reinstating)	DATE		
12.		D DIRECTORS	13.	·····	ADDITIONS/CHANGES TO OFFIC			
TITLE	DP	☐ DELETE	1.1 TITLE			Change	Addition 3	
NAME	WISHE, JEROME		1.2 NAMi	E.				
STREET ADDRESS	13240 SW 102ND ST		1.3 STRE	ET ADDRESS			إ	
CITY-ST-ZIP	MIAMI FL		1,4 CITY				_ <del></del>	
TITLE	DV	☐ DELFTE	2.1 111LE	- 1		☐ Change	Addition C	
NAME	LEVENSTEIN, EDWARD		2.2 NAMI	i				
STREET ADDRESS	13240 SW 102ND ST MIAMI FL		1	ET ADDRESS			<b>,</b>	
CITY-ST-ZIP		T DELETE	2 4 CITY			Change	Addition	
TITLE	DT MARKE EDEVA	DELETE	3111111	i i		Change	Addition	
NAME	Wishe, Freya 13240 SW 102ND ST		3.2 NAMI					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	MIAMI FL DS	DELETE	3.4. CITY 4.1 TITLE			Change	Addition	
TITLE	Levenstein, dorita	ן הנינונ .				FT pilange	☐ VOUITION	
NAME OTREET ADDRESS	13240 SW 102ND ST		4. 2 NAM	ì			-	
STREET ADDRESS	MIAMI FL			ET ADDRESS				
CITY-ST-ZIP	MAMILE	DELETE	4.4 C/TY 5.1 TITLE			Change	Addition	
TITLE						FT Organge	noulloll	
NAME			5.2 NAMI		•		1	
STREET ADDRESS				FT ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 T(TLE			☐ Change	Addition	
		ביי מנינונ	6.2 NAM	i		☐ Ollarige		
NAME				·				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			6.4 CITY	-S(-Z)P				

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 supplimental 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 received 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 or an attay himent with an address.