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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V57842

(9)

Mailing Address

FERNINAND ZANDER

JEFFERSON HOLDING CORPORATION

FILED
Mar 05 1997 8:00am
Secretary of State

|--|

11645 BISCAYNE B SUITE 410 NORTH MIAMI FL S		11645 BISCAYNE BLVD. Suite 410 North Miami FL 331814	31 48			3. Date Incorporated or Qualified 3a. Date of Last Report 03/04/1996
2. Principal Place	of Remande	2a, Mailing Address				
2. Principal Flace	O. D'Osinfo2a	26				4. FEI Number Applied For 65-0364820 Not Applied
Suite. Apt #, et	ic.	Suite, Apt. #, etc.	<u> </u>			40 TF
22		27				5. Certificate of Status Desired
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28	·r		······· • • · · · · · · · · · · · · · ·	Trust Fund Contribution Added to Fees
Zιρ η	Country	Z _i p	Cour	niry		8. This corporation has liability for intangible tax under s. 199.032
24]	25 Name and Address of Curre	nt Registered Agent	30			Florida Statutes X Yes No 10. Name and Address of New Registered Agent
	BRIAN D.	in registered regist		81	Name	10. Hattie min voortees of steam indianates valeur
	COLN ROAD		\	_		
SUITE 3				82	Street Ac	Address (P.O. Box Number is Not Acceptable)
	BEACH FL 33139		-	83		
MA MAIL E						
		•		84	City	FL 85 Zip Code
12.	or operacional de la completa de OFFICERS Af	NO DIRECTORS	TE: Registered	Age	nt signature re	required when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Title P		DELETE.	1.1 111	LE		Change Add
	ANDER, FERDINAND		1.2 NA	ME		•
	895 NE 117TH RD		1.3 \$16	REFT	ADDRESS .	
a a a a a a a a a a a a a a a a a a a	MIAMI FL	Delete	1.4 CIT		T-ZIP	NORTH MIMMI, FC, 33181
THE		DELETE	2 1 717		1	Change Add
NAME STREET ADDRESS			22NA		ADDRESS	
CHY-SI-72			2 4 CI			·
1-ful		DELETE	3 1 TIT		11-21	☐ Change ☐ Add
NAMi			32 NA	ME	- 1	
STREET ADDRESS			3 3 ST	REET	ADDRESS	
CHY-S1-ZiP			3 4. CI	IY-S	ST-ZIP	
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NAME			4. 2 N/			
STREET ADDRESS.			1		ADDRESS	
COTY-ST ZIP		DELETE	4.4 Crt 5.1 Trt		T-ZIP	Change Ado
NAME		C) better	5.2 NA			
STREET ACCURESS					ADDRESS	
OTY - S1 - ZiP			5.4 CIT		1	
301E		DELETE	6.1 T()		-	☐ Change ☐ Ado
NAME			6.2 NA	ME		
STREET ACCURESS			. 6.3 ST	REET	ADDRESS	
CITY - ST - ZIP			6.4 CIT			Ι Δ
information in Lam an office	ertify Inat the information suppli dicated on this annual report or or director of the corporation of ock 12 or Block 13 if changed.	supplemental annual report is or the receiver or trustee empor	true and a wered to e	exe CCL XAC	imption sta urate and t cute this re	stated in Section 119.07(3)(i). Florida Statutes. I further certify that the 3 that rhy signature shall have the same legal effect as if made under oath appriles required by Chapter 607, Florida Statutes; and that my name