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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # V68821

(0)

J & E APPAREL SALES INC.

Moleculi

**FILED** 

May 08 1998 8:00am

Secretary of State

Juci	WANTE OVERED INC.					
Principal Place	e of Business	Mailing Address			848 81841 91914 91811 81811 98911 7001	
777 NW 72 AVE		21354 GOSIER WAY				
MIAMI FL 33126		BOCA RATON FL 33428		DO NOT MIDITE IN	TUIO 00 A OF	
US		US		DO NOT WRITE IN  3. Date Incorporated or Qualified	TRIS SPACE	
				10/06/1992		
2. Principal Pi	ace of Business	2a. Mailing Address		4, FEI Number	Applied For	
21		26		65-0374377	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	<b>28</b> Zip	Country	Trust Fund Contribution		
24 ZIP	25	29	30	<ol> <li>This corporation owes or has paid to Personal Property Tax due June 30</li> </ol>		
27		Current Registered Agent	30	10. Name and Address of New Regis		
MIL	LER, JAMIE		81 Name	To a della		
	27-LAKE-OAK-WAY-		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33498			UZ ONGER AUG	21354 GHIER Way		
			83			
			84 City	<del>-</del>	85 Zip Code	
	<u> </u>			Bois Kith	FL   33428	
office or re	a <b>hister</b> od agent or both in th	so State of Horida, Such change was	authorized by the cornoral	poration submits this statement for the purp tion's board of directors. I hereby accept the	pose of changing its registered ne appointment as registered	
agent I ar	of Impiliar with, and accept the	configations of, Section 607.0505, Fi	orida Statutes.	, , , , , , , , , , , , , , , , , , , ,	,	
SIGNATURE	<del>/-/</del> //////////////////////////////////	Sterett agent anglette if applicable (NO	IE: Registered Agent signature requi	to dubon reinstation)	DATE	
12.	OF FICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER		
TITLE	1 p	☐ DELETE	1.1 TITLE		Change Addition	
NAME	MILLER, ERROHL		1.2 NAME			
STREET ADDRESS	21354 GOSIER WAY		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP			
TITLE	V	DELETE	2.1 TITLE		Change Addition	
NAME	MILLER, JAMIE	,	2.2 NAME			
STREET ADDRESS	10727 LAKE OAK WAY BOCA RATON FL		2.3 STREET ADDRESS		•	
CITY-ST-ZIP TITLE	BOCK RATOR FL	DELETE	2. 4 C/TY - ST - Z/P 3.1 TITLE		Change Addition	
NAME			3.2 NAME		C Ontaing C Production	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE	4	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - S1 - ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		T on ere	5.4 CITY - ST - ZIP		T Observe T Addition	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	ertify that the information sur	oplied with this filing does not qualify t	6.4 CITY-S1-ZIP or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furt	ther certify that the information	
indicated	on this annual report or supplication of	lemental annual report is true and act	curale and that my signature	ire shall have the same legal effect as if ma	ade under oath; that I am an	
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; that I am an officer or director of the corporation or the receiver or trustee improved 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 appears.						