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

CITY-ST-ZIP

Block 12 or Block 13 if changed, or

May 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V70395 JF SERVICE CORP. Principal Place of Business Mailing Address 3132 NW 28TH ST. 3132 NW 28TH ST. MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0362918 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FARIAS, JOSE LUIS 3132 NW 28TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** 83 R4 City Zip Code 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NC) L. Registered Agent signature required when reinstating) Signature, typed or printed name of regulared rigent and title if applicable CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE NAME FARIAS, JOSE L. 1.2 NAME 3132 NW 28TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE FARIAS, JOSE LUIS NAME 2.2 NAME 3132 NW 28TH ST. STREET ADDRESS 2.3 STHEET ADDRESS MIAMI FL CITY-\$T-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE **FARIAS, JOSE LUIS** NAME 3.2 NAME 3132 NW 28TH ST. STREET ADDRESS 3.3 STREET ADDRESS Miami Fl CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. Thereby certify that the information sulpdied 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 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

~ 14.58

attachment with an address

FILED