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

PROFI1 CORPORATION ANNUAL REPORT

1997

JODEE, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 423679

(0)

**FILED** Apr 04 1997 8:00am Secretary of State



Principal Place of Business Mailing Address									
9100 N 29TH AV HOLLYWOOD FL US		3100 N. 29TH AVE. HOLLYWOOD FL 3302 US	HOLLYWOOD FL 33020-1300						
						3. Date incorporated or Qualified 04/16/1973		ate of Last R /01/1996	lepori
2. Principal Pla	cc of Business	28. Mailing Address	2a. Mailing Address			4. FEI Number			optied For
21		26				59-1457330			ot Applicable
Suite, Apl. #, 22	, etc	Suite, Apt. #, etc.	<del></del>			5. Certificate of Status Desired			Additional equired
City & State	,	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28			*****	Trust Fund Contribution		<del></del>	to Fees
Ζφ <b>24</b>	Country	7ip <b>29</b>	30	untry		8. This corporation has liability for Florida Statutes	intangibli ∐Yes		. 199.032,
24]	9, Name and Address of Cur		30		T-1-1-1-1	10. Name and Address of New R			
GREE	NBERG, BERT			81	Name			, <del></del> ,,,	
2030	S OCEAN DR			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
APT 1	1904 Andale fl 33009			83					
1 1/100	MIDALL I E COOCE				<del></del>	<del></del>		<del></del> _	
				B4	- •		FL	_   '	Code
CHONNE THEFT			tatutes, the a vas authorize 5, Florida Sta	bove id by tutes	e-named corporation	oration submits this statement for the on's board of directors. I hereby according to the contract of the cont	purpose op opt the ap	of changing it pointment as	ts registered registered
SIGNATURE 5	aj a tak i typad or zirnekt namir et registered	agent and title if applicable	(NOTE: Registere	d Age	nt signature require	d when reinstating)	DATE		
12.	PSD OFFICERS.	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AN		
,	GREENBERG, BERT	[] DELETE	1		}	•		Change	Addilion
	2030 S OCEAN DR APT 19	M.	1.2 N						
	HALLANDALE FL	V1		IKEET ITY-S	ADDRESS				
THE		DELETE			1 - ZIP		~ ~~~~	Change	Addition
NAME		•	2.2 N	AME				-	
STREET ADDRESS			2.3 \$	TREET	ADDRESS				
CHT-ST ZIP			2.40	CHTY- S	ST-ZIP				
TITLE		☐ DELETE	I -					Change	☐ Addition
NAME			3.2 N						
STREET ADDRESS					ADDRESS				
COLVISTI- ZIP TITLE		DELETE		DITY-S	51 - ZIP			Change	Addition
NAME		L., DELCIL	4.21					— seaufe	radijion
STREET ADDRESS					ADDRESS				
City-St-7P				ITY-S					.
TIFLE		DELETE						Change	Addition
NAM:			5.2 N	AME		•			
STREET ADDRESS					ADDRESS	•			
CITY+ST-20F			5.4 C	ITY-S					
TITLE		DELETE	6.1 T	ITLE				Change	Addition
NAME			6.2 N	IAME	ļ				1
STHEET ADDRESS			6.3 S	TAEET	address				
Crty - S1 - 21P			6.4 C	ITY-S	T-ZIP				

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), 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 or the receiver 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 schanged, or an attachment with an address.

SIGNATURE:

BERT GREFNBERG PRES