## 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 #

Principal Place of Business

P94000091252 (4)

Mailing Address

JBL DESIGN, INC.

FILED
May 05 1998 8:00am
Secretary of State

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C/O JANICE 19495 BISCA' AVENTURA F	YNE BLVD SUITE 410	C/O JANICE LIPTON 19495 BISCAYNE BLVD SUITE 410 AVENTURA FL 33180			DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  12/16/1994					
9 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		IAn	plied For	
21	ace of Business	26				65-0559540			t Applicable	
Suite, Apt. 4	i. etc.	Suite, Apt. #, etc.						\$8.75		
22		27				5. Certificate of Status Desired		Fee Re	quired	
City & State	•	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	•	
Zip	Country	Zip	Countr	у		8. This corporation owes or has p	aid the curi	ent year Int	angible	
24	25	29 3	0			Personal Property Tax due June	e 30. 🛚 🖸	] Yes	No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered /	Agent		
BARNEY, JANICE 81 Name										
19495 BISCAYNE BVLD				2 St	treet Addre	ess (P.O. Box Number is Not Accepta	ble)			
	E 410		82 Street Addr			(			•	
AVENTURA FL 33180				3						
,,,,			84	Ci	is.			<b>85</b> Zip (	Code	
			6	1	щу		FL	103 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.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND			
TITLE	D	☐ DELETE	1.1 TITLE					Change	Addition	
NAME	LIPTON, JANICE		1.2 NAME							
STREET ADDRESS	10.150 010.01111111 011111 01111			1.3 STREET ADORESS						
CITY-ST-ZIP	AVENTURA FL 33180		1.4 CITY-	ST-ZIP	P					
TITLE	D	☐ DELETE	2.1 TITLE			100		Change	☐ Addition	
NAME	LIPTON, ALAN		2.2 NAME	Ę					ļ	
STREET ADDRESS	19495 BISCAYNE BLVD., STE	410	2.3 STREET ADDRESS		RESS					
City-St-ZIP	AVENTURA FL 33180		2. 4 CITY	-\$1-ZII	IP					
TITLE	DELETE		3.1 TITLE					Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	ET ADDF	ress					
CITY-ST-ZIP			3.4. CITY	- \$T - ZII	IP					
TITLE	DELETE /							Change	Addition	
NAME			4. 2 NAM	£						
STREET ADDRESS			4.3 STREE	ET ADOF	RESS					
CITY-ST-ZIP			4.4 CITY-	ST - 21F	Р					
TITLE		DELETE	5.1 TITLE					Change	Addition	
NAME			5.2 NAME		-					
STREET ADDRESS			5.3 STREE	ET ADDF	RESS					
CITY-ST-ZIP			5.4 CITY-	- ST - ZIF	Р					
TITLE		☐ DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME	Ε.						
STREET ADDRESS			6.3 STREE	ET ADDI	RESS					
CITY-ST-ZIP			6.4 CITY-	ST - ZIF	P					
14. I hereby o	certify that the information supplied w	th this filing does not qualify for	the exem	ption	stated in	Section 119.07(3)(i), Florida Statutes.	I further ce	rtify 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 if changed, or on an attachment with appladdress.										