

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P95000066078 (3)**

1. Corporation Name  
**JMJ GEORGIA, INC.**



Principal Place of Business: **9350 S. DIXIE HIGHWAY SUITE 900 MIAMI FL 33156**  
Mailing Address: **9350 S. DIXIE HIGHWAY SUITE 900 MIAMI FL 33156**

3. Date Incorporated or Qualified: **08/25/1995**  
3a. Date of Last Report:  
4. FEI Number: **65-060976A** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes  Yes  No

2. Principal Place of Business:  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
25. Country  
2a. Mailing Address:  
26. Suite, Apt. #, etc.  
27. City & State  
28. Zip  
29. Country  
30. Country

9. Name and Address of Current Registered Agent  
**PUCK, ROBERT  
9350 S. DIXIE HIGHWAY  
SUITE 900  
MIAMI FL 33156**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0422 and 607.1506, 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 607.0405, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature, typed or printed name of officer, director, or registered agent) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
1. TITLE: **D**  
NAME: **PUCK, ROBERT**  
STREET ADDRESS: **9350 S. DIXIE HIGHWAY #900**  
CITY-ST-ZIP: **MIAMI FL 33156**  
2. TITLE:  DELETE  
3. TITLE:  DELETE  
4. TITLE:  DELETE  
5. TITLE:  DELETE  
6. TITLE:  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1. TITLE:  Change  Addition  
2. NAME:  
3. STREET ADDRESS:  
4. CITY-ST-ZIP:  
5. TITLE:  Change  Addition  
6. NAME:  
7. STREET ADDRESS:  
8. CITY-ST-ZIP:  
9. TITLE:  Change  Addition  
10. NAME:  
11. STREET ADDRESS:  
12. CITY-ST-ZIP:  
13. TITLE:  Change  Addition  
14. NAME:  
15. STREET ADDRESS:  
16. CITY-ST-ZIP:  
17. TITLE:  Change  Addition  
18. NAME:  
19. STREET ADDRESS:  
20. CITY-ST-ZIP:

**500001869025**  
**-06/20/96--01023--040**  
**\*\*\*200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report, 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, the officer or director authorized 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 addendum with an address.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96 305 670 2277  
05 5/11/96

CR2E034 (12/95)