

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

**FILED**  
**Jan 28 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000029769 (2)**  
 1. Corporation Name  
**JACOBI INTERNATIONAL, INC.**



Principal Place of Business 1111 LINCOLN ROAD, STE 500 MIAMI BEACH FL 33139	Mailing Address 1111 LINCOLN ROAD, STE. 500 MIAMI BEACH FL 33139
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>800 CLAUGHTON ISLAND</b> Suite, Apt. #, etc. 22 <b>APT #1505</b> City & State 23 <b>MIAMI</b> Zip 24 <b>33131</b>	2a. Mailing Address 26 <b>SUN TRUST INTL. CENTER</b> Suite, Apt. #, etc. 27 <b>ONE S.E. 3rd AVE</b> City & State 28 <b>SUITE 2400 MIAMI</b> Zip 29 <b>33131</b>
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3. Date Incorporated or Qualified <b>04/01/1996</b>	4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>FEUERMAN, JONATHAN</b> 1111 LINCOLN ROAD, STE. 500 MIAMI BEACH FL 33139	10. Name and Address of New Registered Agent 81 Name <b>Feuerman, Jonathan, Esq</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>Sun Trust International Center</b> 83 <b>One S.E. 3rd Ave, Suite 2400</b> 84 City <b>MIAMI</b> FL 85 Zip Code <b>33131</b>
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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 \_\_\_\_\_ DATE **1/16/98**

12. OFFICERS AND DIRECTORS		DELETED
TITLE	<b>D</b>	<input checked="" type="checkbox"/>
NAME	<b>FEUERMAN, JONATHAN</b>	
STREET ADDRESS	<b>1111 LINCOLN ROAD, STE. 500</b>	
CITY-ST-ZIP	<b>MIAMI BEACH FL 33139</b>	
TITLE	<b>P</b>	<input type="checkbox"/>
NAME	<b>RASCH, CHRISTIAN</b>	
STREET ADDRESS	<b>800 CLAUGHTON ISLAND SUITE 1505</b>	
CITY-ST-ZIP	<b>MIAMI FL 33131</b>	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	<b>PRESIDENT + DIRECTOR</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I 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 if changed, or on an attachment with an address.

SIGNATURE: **Christian Rasch** **1/18/98**

CR2E034 (10/97)