

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000088491 (4)

1. Corporation Name

JASAMI, INC.



Principal Place of Business

Mailing Address

1655 PALM BEACH LAKES BLVD
SUITE 502, THE FORUM
WEST PALM BEACH FL 33401

1655 PALM BEACH LAKES BLVD
SUITE 502, THE FORUM
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified

12/29/1993

3a. Date of Last Report

04/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0467382

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVY, ROBERT S
1655 PALM BEACH LAKES BLVD
SUITE 502, THE FORUM
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 of appointment

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME LEVY, ROBERT
STREET ADDRESS %1655 PALM BEACH LAKES BLVD, SUITE 502
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☒ DELETE
NAME LEVY, CEIL N
STREET ADDRESS %1655 PALM BEACH LAKES BLVD, SUITE 502
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Director ☐ Change ☒ Addition
1.2 NAME LEVY, Robert S.
1.3 STREET ADDRESS 1655 Palm Beach Lakes Blvd. #502
1.4 CITY-ST-ZIP West Palm Beach, FL 33401

2.1 TITLE Sec/Treas/Director ☐ Change ☒ Addition
2.2 NAME LEVY, Ceil N.
2.3 STREET ADDRESS 1655 Palm Beach Lakes Blvd. #502
2.4 CITY-ST-ZIP West Palm Beach, FL 33401

3.1 TITLE Asst. Secretary ☐ Change ☒ Addition
3.2 NAME BAKER, Marlene
3.3 STREET ADDRESS 1655 Palm Beach Lakes Boulevard
3.4 CITY-ST-ZIP West Palm Beach, FL 33401

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert S. Levy, President

4-11-96

Date

407/ 686-6080

Daytime Phone

CR2E034 (12/95)