

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000095462 (4)
 1. Corporation Name
JUST FUNKIN, INC.



Principal Place of Business 2743 GREENDALA DRIVE SARASOTA FL 34232	Mailing Address 2743 GREENDALA DRIVE SARASOTA FL 34232
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1636 MAIN ST	2a. Mailing Address 26 6340 TARAWA DRIVE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State SARASOTA FL	28 City & State SARASOTA FL
24 Zip 34236	25 Country USA
29 Zip 34241	30 Country USA

3. Date Incorporated or Qualified 12/18/1995	4. FEI Number 65-0634130	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent
**LONDONO, G.B.
 1636 MAIN STREET
 SARASOTA FL 34236**

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

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 *Sandra B. Mortham* DATE **2-16-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSDT	1.1 TITLE	P - PRESIDENT - D - DIRECTOR
NAME	LONDONO, G.B.	1.2 NAME	LONDONO, G.B. TREASURER
STREET ADDRESS	2743 GREENDALA DRIVE	1.3 STREET ADDRESS	2743 GREENDALA DRIVE
CITY-ST-ZIP	SARASOTA FL 34232	1.4 CITY-ST-ZIP	SARASOTA, FLORIDA 34232
TITLE	D	2.1 TITLE	V.P. PRESIDENT, SECRETARY DIRECTOR
NAME	SHIMA, MICHAEL J	2.2 NAME	Shima, Michael J.
STREET ADDRESS	6430 TARAWA DRIVE	2.3 STREET ADDRESS	6340 TARAWA DRIVE
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	SARASOTA, FL 34241
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 *Sandra B. Mortham* DATE **2/16/98**

CR2E034 (10/97)