## 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 #

P95000095462 (4)

JUST FUNKIN, INC.

Principal Place of Business

Mailing Address

## FILED Apr 17 1998 8:00am Secretary of State



2743 GREENDALA DRIVE 2743 GREENDALA DRIVE SARASOTA FL 34232 SARASOTA FL 34232							
					DO NOT WRITE IN THIS SPA	CE	
					3. Date Incorporated or Qualified		
2. Principal P	ace of Business	2a. Maili Address		<u> </u>	12/18/1995 4. FEI Number	Applied For	
21 //0	RIO MAIN UT	26 63 40 TAR	AWA	$\mathcal{O}_{\mathcal{R}_1}$	CE 65-0634130	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	171001			8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State	BOTA PL	City & State  28 UALASOTA	F	7_	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 34 Z	236 25 USA	29 342.41 30	Country	15A	This corporation owes or has paid the current Personal Property Tax due June 30.	fes No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LONDONO, G.B.				81 Name			
1636 MAIN STREET SARASOTA FL 34236			82				
•			83				
			84	City	FL <sup>8</sup>	35 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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if epplicable. (NOTE: Registered Agent signature required when reinstating).  DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12	
TITLE	PSDT	☐ DELETE	1.1 TITLE	1	P-PRESIDOUT - D- DIRECTOR W	Change Addition	
NAME	LONDONO, G.B.		1.2 NAME	K	on one G. B. TREPROKER	PIDIT :	
STREET ADDRESS	2743 GREENDALA DRIVE		1,3 STREET	address 🗦	2743 GREENDALA URINE	, - , .	
CITY-ST-ZIP	SARASOTA FL 34232		1.4 CITY - S	T-ZIP	SARASOHA FLORIDA 34732	و [	
TITLE	Ď	☐ DELETE	2.1 TITLE	1	IPARCIDENT, SECRETARY DA	Change Addition	
NAME	SHIMA, MICHAEL J		2.2 NAME		Shima Michael J.	KLUOR	
STREET ADDRESS	6430 TARAWA DRIVE		2.3 STREET		6340 TARAWA DRIVE	<b>V</b> /5/D	
CITY-ST-ZIP	BARASOTA FL	December	2. 4 CITY - S	T-ZIP	SAICHSOTA, I-L 34241	0	
TITLE		☐ DELETE	3.1 TITLE		Ц	Change	
NAME			3.2 NAME				
STREET ADDRESS			3 3 STREET				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - S 4.1 TITLE	T-ZIP	·-···	Change Addition	
NAME			4.1 HILE 4.2 NAME		ч	Change xadition	
STREET ADDRESS		:	4.2 NAME	ADDOCCO			
			4.4 CITY - ST				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	1 - ZIP		Change Addition	
NAME			5.2 NAME		<u> </u>	Situation	
STREET ADDRESS			5.3 STREET	ADORESS			
CITY-ST-ZIP			5.4 CITY+S	1			
TITLE		DELETE	6.1 TITLE	. 211		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS	•		
CITY-ST-ZIP			6.4 CITY-SI				
44 166-			0.4 0111-31	411	C. O. C. 440 07(0)(0) Finish Of A 41 (4 A)		

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 on an attachment with an address.

SIGNATURE /