

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

CORPORATION ANNUAL REPORT 1995

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



APPROVED AND FILED
 1995 MAY - 1 11 09:50
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **423303** (7)
 1. Corporation Name
JAAC, INC.

Principal Place of Business Mailing Address
701 S.W. 27TH AVE. P.O. BOX 1000 MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/12/1973	3a. Date of Last Report 05/01/1994
21	Suite, Apt. #, etc	26	Suite, Apt. #, etc	4. FEI Number 59-1468481	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SHERR, ALAN 701 S.W. 27TH AVE. #1000 MIAMI FL 33135				81 Name	DALTON WLONG		
				82 Street Address (P.O. Box Number is Not Acceptable)	701 S.W. 27 AVE #1000		
				83			
				84 City	MIAMI	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]* **DALTON WLONG** DATE: **4/27/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEISS, CAROLINE	1.2 NAME	ADEENA WEISS
STREET ADDRESS	701 S.W. 27TH AVE. #1000	1.3 STREET ADDRESS	701 S.W. 27
CITY, ST., ZIP	MIAMI FL	1.4 CITY, ST., ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TRUST, DANLITZ	2.2 NAME	ADEENA WEISS
STREET ADDRESS	701 SW 27 AVE	2.3 STREET ADDRESS	701 S.W. 27 AVE #1000
CITY, ST., ZIP	MIAMI FL	2.4 CITY, ST., ZIP	MIAMI FL 33135
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST., ZIP		3.4 CITY, ST., ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST., ZIP		4.4 CITY, ST., ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST., ZIP		5.4 CITY, ST., ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST., ZIP		6.4 CITY, ST., ZIP	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 registered agent 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 in an attachment thereto.

SIGNATURE: *[Signature]* **ADEENA WEISS** DATE: **4/27/95** 305-603-6200