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

**FILED** May 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)JRG. INC. Principal Place of Business Mailing Address 13000 S. DIXIE HIGHWAY 13000 S. DIXIE HIGHWAY MIAM! FL 33156 **MIAMI FL 33156** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1981 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 26 59-2144898 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zıp Country Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes □ No 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GERMANO, YOLANDA 13000 S. DIXIE HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 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 Signature, typed or posted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change Addition GERMANO, YOLANDA NAME 1.2 NAME 13000 S. DIXIE HWY STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST- ZIP CITY-ST-7IP DELETE Addition TITLE 21 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3 1 101 F 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-7IP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Addition Channe TITLE 51 TITLE NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE ☐ Change \_\_\_ Addition 61 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

14. Thereby 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: