## 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 # G90617 (3)

JOMEK CORPORATION

**FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						· · · · · · · · · · · · · · · · · · ·			
1 \$1	1 SE 3RD AVE				1 SE 3RD AVE				
SUITE 1400				SUITE 1400				DO NOT WRITE IN THIS SPACE	
MIAMI FL 33131 US			US	MIAMI FL 33131 US				3. Date Incorporated or Qualified	
-				•					02/06/1984
2. Principal Place of Business 2a. Mailing Ad					Address	dress			4. FEI Number Applied For
21			26	26				<b>59-2394890</b> Not Applicable	
Suite, Apt. #, etc.			Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22			27	City & State				Fee Required	
	City & State			<b>├─┐</b> ′	├ <del>──</del> ┓ ′				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Zip Country			28 Z <sub>ID</sub>	Zip Country			<del></del>	8. This corporation owes or has paid the current year Intangible
24	25 29			<u> </u>	30				Personal Property Tax due June 30. Yes No
	<del></del>	9. Name		rrent Registered A	gent	1001	Ĭ		10. Name and Address of New Registered Agent
	CO	PROLITE C	ORP				81	Name	
ONE SE THIRD AVENUE							82	Street Add	ddress (P.O. Box Number is Not Acceptable)
1400 AMERIFIRST BLDG							Щ		
	MIA	MI FL 331	31				83		
							84	City	85 Zip Code
		<del></del>		1005.4600	En la Gra	41			FL 39 2000
	<ol> <li>Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the office or registered agent, or both, in the State of Florida Such change was authorized.</li> </ol>							the corpor	oration'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.									
SIGN	NATURE	Signature types	for printed page of receive	nd agent and tille it applicable	e (NO	TE: Registere	d Age	nt signature rep	equired when reinstating) DATE
12.	_	Organica D. 1970co		AND DIRECTORS	. , , , , ,	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		PTD			DELETE	1.1 1	TLE		Change Addition
NAME	:	JACKSO	ON, CARLA			1.2 N	AME		
STREE	T ADDRESS		RD AVE. #1400			1.3 S	TREET	ADDRESS	
-	ST-ZIP	MIAMI F	L 33131		T DELETE		TY - S	T- ZIP	Character T Addition
TITLE		VSD	T 101011115		☐ DELETE	2.1 Ti		- 1	Change Addition
NAME			IT, YVONNE			2.2 N			
	T ADDRESS		RD AVE. #1400 L 33131					ADDRESS	
TITLE	ST-ZIP	MINAMI	L 33131		DELÉTE	3.11		ST-ZIP	Change Addition
NAME						3.2 N			water according to be and control of
	T ADDRESS							ADDRESS	
	ST-ZIP					3 4. 0		- 1	
TITLE	<del></del>				DELETE	4.1 TI		1	Change Addition
NAME						4.21	AMÉ		
STREE	T ADDRESS					4.3 S	TREET	ADDRESS	
CITY-	ST-ZIP					4.4 0	ITY-S	T-ZIP	
TITLE					☐ DELETE	5.1 Ti			Change Addition
NAME						5.2 N			
	ET ADDRESS							ADDRESS	
	ST-ZIP			······································	DELETE		ITY-S	T-ZIP	Change Addition
TITLE					vn	6.1 T			L comme L notition
NAME						62 N		ADDRESS	
	T ADORESS						INCE : ITY-S	i	
6117-	ST-ZIP	-14			1				Lin Coation 110 07/3Vi) Florida Statutos I further partify that the information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the informatic 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.