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

FILED May 07 1998 8:00am Secretary of State

1. Corporation	n Na me	# JO44 On systems		(6)				Č I. Š. S.	181 618 11 88 2 1
Principal Place	e of Business		Mailing	Mailing Address			a contributed and a state and	#II BIBII BIBII BIBI	II WAWII HOUT
1901 S.W. 50TH AVE. FT. LAUDERDALE FL 33317 US			FT. LAI	1301 S.W. 50TH AVE. FT. LAUDERDALE FL 33317 US			DO NOT WRITE IN THI	S SDACE	
03			US	03			3. Date Incorporated or Qualified		
							03/18/1986		
2. Principal P	lace of Busin	oss	2a. Maili	ng Address			4. FEI Number	Ai	pplied For
21			26				59-2713105	No	ot Applicable
Suite, Apt.	#, etc.		Suite 27				5. Certificate of Status Desired		Additional equired
City & State	e		<u>├</u>	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country		Zip	· +		/	8. This corporation owes or has paid the o		
24	25		29				Personal Properly Tax due June 30. Yes No		
			urrent Registered	Agent	81	1	10. Name and Address of New Registere	d Agent	
HOPKINS, JEFFREY B						Name			İ
1)1 SW 50 A				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
FT FT	LAUDERDA	LE FL 33317				ļ	· · · · · · · · · · · · · · · · · · ·		
					83				
				84 City			F	85 Zip	Code
11. Pursuant to	to the provision of the total depth to the total de	ons of Sections 60 ent, or both, in the	7.0502 and 607.150 State of Florida, Su	08, Florida Statut ich change was	tes, the abov authorized by	e-named corp y the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing it	ts registered registered
SIGNATURE			obligations of, Sect						
12.	Signature, type i c		re.Lagent and bite if applic S AND DIRECTORS		f Registered Age	ent signature requi	red when reinstating) DATE	ID DIRECTOR	20 151 40
TITLE	PD PD		3 AND DINE CTOR	DELETE		T	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
NAME		, JEFFREY B		[] DELETE 1.11					
STREET ADDRESS	AGGA GILL CATIL ALIE			1.3 STREET ADDRESS					
CITY-ST-ZIP	PT LAUDEDDALE CL			1.4 C(TY-ST-ZIP					
TITLE				DELETE	2.1 TITLE			Change	Addition
NAME				22					
STREET ADDRESS	DRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP				2. 4 Cl					
TITLE	·			DELETE 3.				Change	Addition
NAME I					3.2 NAME				
STREET ADDRESS					3 3 STREET				
CITY-ST-ZIP				DELETE	3 4. CITY-	ST-ZIP			T Large
TITLE				L DELETE	4 1 THLE			Change	☐ Addition
NAME CTREET ADDRESS					4 2 NAME	1000000			
STREET ADDRESS					4.3 STREET				
CITY-ST-ZIP TITLE				DELETE	4.4 CITY - S 5.1 TITLE	1-414		Change	Addition
NAME					5.2 NAME			- Amingo	
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY-ST-ZIP					5.4 CITY - S				
TITLE				DELETE	6.1 T(TLE	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME					6.2 NAME			.	
STREET ADDRESS					6.3 STREET	ADDRESS			
CITY-\$T-ZIP					6.4 CITY - S	1-2IP			
44 1 1 2 2 2 2 2 2 2	- AM - AT - 6 11		1 20 41 70 7				O P A D SELONE EL TITO	100 100 100	1 4 1

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 13 if changed, or on an attachment with an address.

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