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 #

J31757

(4)

JMARCO, INC.

FILED

Apr 02 1998 8:00am

Secretary of State

Dalar da et Dia						
Principal Place of Business Mailing Address						bingti mimit mimit miftit fiftig ifft
% IRA STEWART WIESNER % IRA STEWART WIESNER						
1800 SECOND ST., STE 870 SARASOTA FL 34236-5964		1800 SECOND ST., STE 870 SARASOTA FL 34236-5984		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
""""	2 01200 0001	ONINGOTH TE 04250-0004			3. Date Incorporated or Qualified	10 01 7102
					09/02/1986	
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					35-1493567	Not Applicable
Sulte, Apt. #, etc. Suite. Apt. #, etc.			•			\$8.75 Additional
22 27		27			5. Certificate of Status Desired	Fee Required
City & State City & State		City & State	1		6. Election Campaign Financing	\$5.00 May Be
23					Trust Fund Contribution	Added to Fees
Zip	Country	Zip Cour		ry	8. This corporation owes or has paid the	
24	25 29 30			Personal Property Tax due June 30. Yes 🔀 No		
9, Name and Address of Current Registered Agent				41 61	10. Name and Address of New Register	ed Agent
	ESNER, IRA STEWART		8	1 Name		
1800 SECOND STREET			8	82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 870						
SARASOTA FL 33577			8	3		
			8	City		85 Zip Code
44.5			<u> </u>		F	
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						
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 Statules.						
SIGNATURE						
12.	Signature, typed or printed name of registered	d agent and title if applicable. (NOTE:- AND DIRECTORS		genlaignature	required when reinstaling) DATE	
TITLE	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	
NAME	MARTIN, JAMES		1.2 NAME		_	Change Addition
STREET ADDRESS				2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 2.1 TIFLE 2. NAME 3. STREET ADDRESS 3009 DICK WILSON DR. 3. STREET ADDRESS 4. CITY-ST-ZIP 5. ARASOCA, FL 34240 4. CITY-ST-ZIP 5. ARASOCA, FL 34240		
CITY-ST-ZIP	SARASOTA FL			ADURESS	Cannesta El Sucia	
TITLE	\$TD	DELETE	1.4 CITY - 2.1 TITLE	S1-ZIP	SAKASOLA, 12 37240	Change Addition
NAME	MARTIN, M.SHIRL	- Deterie	2.1 HILL 2.2 NAME			LI Change LI Addition
STREET ADDRESS	7302 PERIWINKLE			T ADDRESS	2000 nick with son de	
CITY-ST-Z#P	DADACOTA FI			AUDRESS	CARACITA EL ZHOUA	
TITLE	CHINOCIATE	DELETE	2. 4 CITY 3.1 TITLE	· ST-ZIP	SAKASOCA, FL 3 7070	[] (No. 1) [] (Approx.)
NAME		beleft	3.1 TILE			☐ Change ☐ Addition
STREET ADDRESS			4			
CITY-ST-ZIP				T ADDRESS		
TITLE		DELETE	3.4. CITY- 4.1 TITLE	S1-21P		Change Addition
NAME		_ otete	4. 2 NAME	.		☐ Charige ☐ Addition
STREET ADDRESS				- 1		
CITY-ST-ZIP			I	T ADDRESS		
TITLE		DELETE	4.4 CITY- 5.1 TITLE	S1-ZIP	V-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Change Addition
NAME		FT SELET				☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME			
				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY -	S1-ZIP		Obanas Classos
NAME		C) bettere	6.1 TITLE 6.2 NAME	İ		Change Addition
INAUC .			EL O.Z NAME			1

14. 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, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

CICKLATURE.

STREET ADDRESS

CITY-ST-ZIP