

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED

98 OCT 26 AM 8:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 104102  
 1. Corporation Name

JAM-ROCK INC.

Principal Place of Business	Mailing Address
<u>11330 ROYAL PALM BLVD CORAL SPRINGS, FL. 33065</u>	<u>(SAME)</u>

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 <u>11330 ROYAL PALM BLVD</u>	26 <u>SAME</u>
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 <u>CORAL SPRINGS, FL.</u>	28 <u>CORAL SPRINGS, FL.</u>
24 <u>33065</u>	25 <u>FLORIDA</u>
29 <u>33065</u>	30 <u>FLORIDA</u>

3. Date incorporated or Qualified	4. FEI Number	Applied For
<u>11-87</u>	<u>65-0020894</u>	<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution	\$8.75 Additional Fee Required
<input type="checkbox"/>	<input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

HOWARD BRAVO  
9754 SARATOGA PK. CT.  
BOCA RATON, FL. 33428

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	<u>FL</u>
83	
84 City	

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: Howard Bravo DATE: 10-23-98  
Signature or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>TREASURER</u> <input checked="" type="checkbox"/> DELETE	11 TITLE	<u>TREASURER/PS</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<u>DEXTER BRAVO</u>	12 NAME	<u>HOWARD BRAVO</u>
STREET ADDRESS	<u>11330 ROYAL PALM BLVD.</u>	13 STREET ADDRESS	<u>9754 SARATOGA PK CT.</u>
CITY-ST-ZIP	<u>CORAL SPRINGS, FL 33065</u>	14 CITY-ST-ZIP	<u>BOCA RATON, FL. 33428</u>
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	<u>500002679125-6</u>
STREET ADDRESS		23 STREET ADDRESS	<u>-11/03/98-01056-011</u>
CITY-ST-ZIP		24 CITY-ST-ZIP	<u>*****61.25 *****61.25</u>
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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.

SIGNATURE: Howard Bravo DATE: 10-23-98

CR2E034 (5/98)