

07/19/1999 09:09 970-8791272

JORDAN AMER

07071999-90009-049-\$150.00-\$150.00

FILED
Jul 07, 1999 8:00 am
Secretary of State

07-07-1999 90009 049 ***150.00

SECURITY NOTICE: CORPORATION WILL BE REVOKED IF IT DOES NOT FILE AN ANNUAL REPORT BY 07/19/99.
 AMOUNT DUE ON OR BEFORE 08/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # M28539

1. Corporation Name

IMPACT FINANCIAL NETWORK, INC.

Principal Place of Business
 1875 SKI TIME SQUARE
 STE. ONE
 STEAMBOAT SPRINGS CO 80487
 US

Mailing Address
 1875 SKI TIME SQUARE
 STE. ONE
 STEAMBOAT SPRINGS CO 80487
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1988

4. FEI Number

59-2647751

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. This corporation owes the current year
Intangible Personal Property.☐Yes ☐ No

9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES, INC.
 201 S. BISCAYNE BLVD.
 SUITE 3000
 MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1506, 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	JORDAN, WALLACE N	
STREET ADDRESS	1875 SKI TIME SQUARE #1	
CITY-STATE-ZIP	STEAMBOAT SPRINGS CO 80487	
TITLE	DST	☐ DELETE
NAME	CLARK, CHARLES R	
STREET ADDRESS	1875 SKI TIME SQUARE #1	
CITY-STATE-ZIP	STEAMBOAT SPRINGS CO 80487	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(b), 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/30/99

CFR2034 (5/98)

JORDAN AMERICAN HOLDINGS, INC.
dba EQUITY ASSETS MANAGEMENT (Symbol: JAH1)

601434-90006-7
M28539

July 27, 1999

Ms. Katherine Harris
Florida Department of State
Division of corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Ms. Harris,

The purpose of this letter is to respond to your letter dated July 8, 1999 (herein attached) regarding the Annual Report. Please be advised that we never received an Annual Report notice from your department.

Please be further advised that we filed the Annual Report - Second Notice immediately when you mailed it to our office.

In talking with a member of your staff, we are filing this letter requesting that you waive the \$400.00 late fee. If you have any questions, please contact me at (412) 664-6012.

Sincerely,



A.J. Elko
Chief Financial Officer

AJE/pac

Enclosure

IMPACT FINANCIAL NETWORK, INC.
MEMBER NASD ♦ MEMBER SIPC

1875 Ski Time Square Drive ♦ Suite One ♦ Steamboat Springs, CO 80487
970-879-1189 ♦ 800-879-1189 ♦ FAX 970-879-1272
www.jahi.com ♦ E-mail: info@jahi.com

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