## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # P01923** Corporation Name

JMC SECURITIES, INC.

**FILED** Jan 22, 1999 8:00am **Secretary of State** 

01-22-1999 90010 021 \*\*\*158.75



	/ Division and	Mailing Address					
Filliplicate trace of promotes			1				
3850 N CAUSEWAY BLVD #1400		P O BOX 6468		DO NOT WRITE IN THIS SPACE			
P O BOX 6468		METAIRIE LA 70002					
METAIRIE LA 7000	K	<del></del>			Date Incorporated or Qualifed		1
					05/08/1984		
	- f Duringer	2a. Mailing Address			4. FEI Number	<u> </u>	ed For
2. Principal Plac	Principal Place of Business 2a. Mailing Address 26				72-0905314		Applicable
21 Suite		Suite, Apt. #, etc.	rite Ant # etc.		5 Certificate of Status Desired	\$8.75 Ad	
Suite, Apt. #, etc.		<b>—</b>		5. Certificate of Status Desired	Fee Requ	ured	
22		City & State		6. Election Campaign Financing	\$5.00 M		
City & State		<del> </del>		Trust Fund Contribution	Added to	Fees	
23		Zip Country		8. This corporation owes the current year Int	angible		
Zip	Country				Personal Property Tax.	Yes 5	No
24	25				10. Name and Address of New Registered Agent		
	9. Name and Address of Current	Registered Agent	81	Name			!
			10.				
CT CC	ORPORATION SYSTEM		82 Street Addres		ress (P.O. Box Number is Not Acceptable)		
	S. PINE ISLAND ROAD		L_	<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tanada -
PLAN	TATION FL 33324		83	3			1 1 1 1 1
			84	1 City		85 Zip Ci	ode '
			1 -	1 ' '	F <u>L</u>	<u> </u>	
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 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 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.							
11. Pursuant t	o the provisions of Sections 607,0502	of Florida. Such change was author	orized by	y the corporation	on's board of directors. I hereby accept the appo	manera do log	
agent an	gistered agent, or both, in the State on familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statute	5.			ļ
					ed when reinstating) DATE		
SIGNATURE	Signature, typed or printed name of registered agent		13.	But signatura require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
12.	OFFICERS ANI		1.1 TITLE			Change	Addition
TITLE	PD	☐ DELETE					
NAME	CASAMENTO, STEPHEN J.		1.2 NAME				
STREET ADDRESS	3104 PALM VISTA DRIVE		1.3 STRE	ET ADDRESS	·		
	METAIRIE LA		1.4 CITY-	·ST-ZIP		Change	Addition
CITY-ST-ZIP	STD DELETE 2.1 TI		2.1 TITLE	<u> </u>		□ • ··-··3-	-
TMLE	BOHNET, RICHARD F JR.		2.2 NAM	E			ļ
NAME )	BUNNET, NICHARD TON.		2.3 STRE	ET ADDRESS			1
STREET ADDRESS	218 RICHLAND DRIVE, EAST			/-ST-ZIP			
CITY-ST-ZIP	MANDEVILLE LA	□ DELETE	3.1 TITLE			☐ Change	☐ Addition
TITLE	igme jetst i d	_ 0222.10	3.2 NAM				
NAME			1	1			Ì
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TITL	i			
1			4.2 NA	ME			
NAME CYNCET ADDRESS			4.3 STR	EET ADDRESS			1
STREET ADDRESS			4.4 CITY	Y-ST-ZIP		Change	☐ Addition
CITY ST-ZIP		☐ DELETE	5.1 TITL	.E		C cuande	
TITLE			5.2 NAM	AE .			
NAME	1		5.3 STR	REET ADDRESS			
STREET ADDRESS	<b>)</b>			Y-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	6.1 TITI			Change	Addition
TITLE		☐ ncreic	6.2 NAI				
NAME .					•		
STREET ADDRESS	TET ADDRESS			REET ADORESS			
5E., 100.000	1 6 1		6.4 CIT	Y-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, with all other like empowered.

SIGNATURE:

S CHEIPHEN CON AMERICAN OR DIRECTOR