## 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 # P9200005573 (0)

J.A.B. WORLD INVESTMENTS, INC.

## FILED Feb 02 1998 8:00am Secretary of State

91/1 1000

Principal Plac	e of Business HINGTON AVE. 1. 32780	Mailing	Address B. WASHINGTON A FILLE FL 32780			DO NOT WRITE IN		
-						3, Date Incorporated or Qualified		
6 Deigoinal C	llone of Divisiones					11/10/1992		
· ·	Place of Business	——————————————————————————————————————	ling Address			4. FEI Number	<del> </del>	Applied For
21   26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					59-3149545		Not Applicable	
<u></u>					5. Certificate of Status Desired		Additional	
22     27		P Ctoto	do.		C	·	Required	
<b>├</b> ┐ '			Jily & State			6. Election Campaign Financing		May Be
28     Zip   Country   Zip			Countr		Trust Fund Contribution		d to Fees	
24	<u>}</u> n '			у	8. This corporation owes or has paid:			
241	9. Name and Address of Curre		l Agent	30]		Personal Property Tax due June 30  10. Name and Address of New Regis		∐ No
	ARK, ROBERT			81	Name	It. Hame and Address of free Regis	reten Agetit	
2960 SIR HAMILTON CIRCLE				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
TITUSVILLE FL 32780			63	<del> </del>				
1					ĺ			
				84	City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607 05	32 and 607 15	08 Florida Statute	e the abou	e-named co	vooration cultivate this statement for the over	FL	ita saniatava d
office or r	egistered agent, or both, in the State	of Florida Su	uch change was a	ulhorized b	y the corpora	rporation submits this statement for the purpation's board of directors. I hereby accept the	iose of changing ie appointment a	s registered
agent. i a	m familiar with, and accept the oblig	ations of, Sec	tion 607.0505, Flo	orida Statute	S.			
SIGNATURE	Signature, typed or printed name of registered ag	ont and tall ill numb	cable (MOTE	. Dec stared As		uired when reinstating)		
12.	OFFICERS AN			13.	ent signature req	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	IDC IN 12
TITLE	D		DELETE	1 1 TITLE		ADDITIONAL OF THE OFFICER	Change	Addition
NAME JOHANSSEN, WILHEIM			1.2 NAME			ZZ change		
STREET ADDRESS 4420 SOUTH WASHINGTON AVENUE				T ADDRESS			t	
CITY-ST-ZIP	TITUSVILLE FL			1.4 CITY-				
TITLE	DVP		DELETE	2.1 TITLE	21-20		Change	Addition
NAME	CLARK, ROBERT			2.2 NAME				
STREET ADDRESS	4420 S. WASHINGTON AVE.			2.3 STREE	r address			
CITY-ST-ZIP	TITUSVILLE FL			2.4 CITY-			. •	
TITLE			DELET <b>E</b>	3.1 TITLE	<u> </u>	1,10,20	Change	Addition
NAME				3.2 NAME				
STREET ADDRESS					ADDRESS		•	
CITY-ST-ZIP				3.4. CITY-				}
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4. 2 NAME	1			
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S				
TITLE			DELETE	5 1 THILE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S				
TITLE			DELETE	6.1 TITLE			Change	Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.0 STREET				
	ertify that the information supplied w	ith this filing d	one not qualify for			Section 110 07/2VI) Florida Statutos 1 fust	oor oorlife, that the	information

1. I nereby 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 phanged, or on an attachment with an address.