## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

P92000010513 (9)

JMS INTERNATIONAL CORP.

5,7,5						
Principal Place o	of Business	Mailing Address	·····		L FRONTON DIN PONTO ALCHE GOLLE D	IIII BANK BAKAI IIBN BANDI BINDE IIBAD KII KADI
18964 BOB-O-LINK DR Miami Fl 33015 US		18964 BOB-O-LINK DR MIAMI FL 33015 US				
					3, Date Incorporated or Qualified 11/19/1992	3a. Date of Last Report 03/03/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
[21]		26			65-0373782	Not Applicable
Suite. Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		· • · · · · · · · · · · · · · · · · · ·	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
7(p) Country 24 25		Zip Co			8. This corporation has liability for	
		29	30		Florida Statutes Yes No	
	9. Name and Address of Curre	nt Hegistered Agent	81	Name	10. Name and Address of New F	legistered Agent
QTEE!	IACON N		["			
STEEL, JASON M 18964 BOB-O-LINK DR			82 Street Add		ress (P.O. Box Number is Not Acceptat	ole)
MIAMI FL 33015			83			- <del></del>
			84	City		85 Zip Code
11 Pursuant to	the provisions of Sections 607.050	2 and 607 1609 Florida Otal.	too the share	<u> </u>	ration submits this statement for the pu	
familiar with	a agent, or both, in the state of Flor i, and accept the obligations of, Sec	tion 607.0505, Florida Statute	zed by the corp s.	ioration's boa	ird of directors. Thereby accept the app	pose of changing its registered office ointment as registered agent. I am
12.	formine, typed or printed name of registered ager	it and title if applicable (N ND DIRECTORS	OTL: Registered Age	nt signature require		DATE
TIBLE	PSTV	DELETE	13.		ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12  Change Addition
NAM:	CANOVA, SANDRA I		1.2 NAME			Vocation
STREET ADDRESS	18964 BOB O LINK DR.		1.3 STREE	ADDRESS		
City - \$1 - ZiP	MIAMI FL 33015		1.4 CiTY-5	ST - 71P		
THEF	VP	☐ DELETE	2 1 TITLE			Change Addition
NAME	STEEL, JASON M		2.2 NAME			
STREET ADDRESS	18964 BOBOLINK DRIVE		2 3 STREE	ADDRESS		
CHY-S1-ZIP	MIAMI FL		2 4 CITY-	ST - ZIP		
YITLE NAME		☐ DELETE	3 1 TITLE	,		Change  Addition
STREET ADDRESS			3 2 NAME	* ***		
CITY ST ZIF			3 4 CHY-	T ADDRESS		
TILE		DELETE	4. 1 TITLE	51-211		Change Addition
NAME			4.2 NAME			
SEPERT ADDRESS			4.3 STREET	ADDRESS		•
CICY+S1_ZIP			4.4 CITY-5	ST-ZIP		
100F		☐ DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAME			
STREE! ADDRESS			53 STREET	ADDRESS		
CITY - ST- ZIP		C) Ditte	5.4 CITY-5	IT-ZIP		
TITLE NAME		☐ DELETE	6 1 TITLE			Change Addition
STREET ADDRESS			6 2 NAME	4000000		
CTY SI-ZP			63 STREET			
14. I do hereby	certify that the information supplied	with this filing is voluntarily fun	64 City-5	e not qualify f	or the exemption stated in Section 119	07(3)(k) Florida Statutes 1 further
Certify triat t	me miormation indica <b>reo</b> on this ann	iuai redort or suodiemental ant	nual report is tri	ie and accura	ate and that my signature shall have the is report as required by Chapter 607, Fl	same legal effect as if made under

SIGNATURE \_

Sandra Co

Sandra Canova

1/19/96

305/829-8004