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 # P93000008213 (9)

FILED May 07 1998 8:00am Secretary of State

	J.F.M.M	I.A.M. EN	ITERPRISES, INC.								
Principal Place of Business					Mailing Address					- C CERTIOUR ING IRROG CLIPK BUNIC BUIN URAN URAN DURIN DURIN IRRIG CREEK NOOD (INC 1881)	
14	D4 VISCAYA	PKWY		1	417 DEL PRADO BLVD						
CAPE CORAL FL 39990				S	STE 120					DO NOT WRITE IN THIS SPACE	
US					CAPE CORAL FL 33990 US					3. Date Incorporated or Qualified	٦
				_	-					02/02/1993	
2. Principal Place of Business				28.	2a. Mailing Address					4. FEI Number Applied For	1
21			26						65-0389907 Not Applicable	_	
_	Suite, Apt. #, etc.			\vdash	Suite, Apt. #, etc					5. Certificate of Status Desired \$8.75 Additional	
City & State			27	City & State					Fee Required	4	
23			20	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
	Zip Country			1201	Zip Country			,		8. This corporation owes or has paid the current year Intancible	┪
24	•	25		29	29		30			Personal Property Tax due June 30. Yes , No	
9. Name and Address of Current			t Regis	Registered Agent					10. Name and Address of New Registered Agent]	
	MIN	IER, JOHN	I F				81	Name	•		1
1404 VISCAYA PKWY								82 Stree		ess (P.O. Box Number is Not Acceptable)	7
CAPE CORAL FL 33990						83				4	
						83	}				
							84	City		FL 85 Zip Code	1
	NATURE		for pooled name of registered ago	if Arid blor	r applicable (NOT					oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered when reinstating) DATE DATE	
12.			OFFICERS AND) DIREC		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	TITLE P							1.1 TITLE		☐ Change ☐ Addition	٠ ا
	MINER, JOHN F							1.2 NAME			1
STREET ADDRESS 1417 DEL PRADO BLVD., #120 CAPE CORAL FL			U				1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			į	
	CITY-ST-ZIP CAPE CORAL FL				DELETE	2.1 TITU		1-211		Change Addition	, {
NAM	in				_		22 NAME			_ • -	
	EET ADDRESS		EL PRADO BLVD., #12	0		235	STREET	ADDRESS	1		Ì
CITY	- \$1 - ZIP		ORAL FL			2 4	CITY-S	ST-ZIP			
IIII					☐ DELETE	3.1 1	3.1 TOLE			Change Addition	
NAM	-						IAME				
STREET ADDRESS							ADDRESS				
	-ST-ZIP				DELETE	34 (41)		ST-ZIP		Change Addition	1
TITLE NAME				L MILL	4 2 1/1				Change Mounton		
	ET ADDRESS							ADDRESS			
CITY-ST-ZIP					4.4 CITY - ST - ZIP						
TITLE				DELETE	5 1 TITLE			1	☐ Change ☐ Addition	1	
NAM	NAME				5 2 N/						
STRE	STREET ADDRESS				5 3 STA		ADDRESS				
СЛҮ	-ST-ZIP						ITY-S	T-ZIP	ļ		
Ш					DELETE	617				☐ Change ☐ Addition	1
NAM	1					62 N					
	ET ADORESS							ADDRESS	1		
CRY-ST-ZP 14. Express certify that the information supplied with this filing does not qualify for							6.4 CITY-ST-ZIP the exemption stated in			Section 119.07(3)(i), Florida Statutes. I further certify that the information	4

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:

4-28-98