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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000016157 (8)

JS GIFT SOURCE, INC.

Principal Place of Business

WHAT MANOR FROST BLVD Mailing Address 7819 MANOR FROST BLVD **BOYNTON BCH FL 33462 BOYNTON BCH FL 33462** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/25/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0389021 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year intangible TP Yes □ No 30 Personal Property Tax due June 30. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SYV**ani**emi, Jari K 7010 MANOR FOREST BLVD Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BCH FL 33462** 83

1. 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE 1.1 TITLE ☐ Change Addition TITLE SYVANIEMI, JARI K NAME 1.2 NAME 7819 MANOR FOREST BLVF STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BCH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City-St-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP SOUTH SAN SECURIANCE DELETE 5.1 TITLE TITLE -04/22/98---01/735--**-**029 5.2 NAME NAME ***150.00 STREET ADDRESS 5.3 STREET ADDRESS CITY+ST-ZIP 5.4 CITY - ST - 7/P □ DELETE Change Addition THILE 6.1 TITLE 62 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

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 corperation 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 at achieve the same legal effect as if made under oath; that I am an officer or director of the corperation 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 at achieve the same legal effect as if made under oath; that I am an officer or director of the corperation or the receiver of the corperation of the receiver of the corperation of the corperation of the receiver of the corperation of the receiver of 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 at achieve the same legal effect as if made under oath; that I am an officer or director of the corperation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certifies the information of the corperation of the corperation of the corperation of the receiver of the corperation of the corper

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Apr 22 1998 8:00am

Secretary of State

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Zip Code