FILE	FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED			
i .	PROFIT FLORIDA DEPARTME						Ion 16 100	QQ	\cdot 00	om
	JAL REPORT		Sandra B. Mortham Secretary of State				Jan 16 1998 8:00am			
•	1998		DIVISION OF CORPORATIONS				Secretary of State			
	A LL 1900.						j Scorciai y	OI	510	iiC
1. Corporation JNC DI Principal Place 1755 SE 9TH	EVELOPMENT C	Ма 1:	9770 (3) Hing Address 155 SE 9TH ST 1. LAUDERDALE FL 3331	6	PP ***********************************				approximate and approximate an	
US US						Ì	DO NOT WRITE IN	V THIS S	PACE	
							3. Date Incorporated or Qualified 04/22/1993			
2. Principal P	lace of Business	2a.	Mailing Address				4. Ft. Number	//	Ar	oplied For
21		26					65-0404589			ot Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Fee Re	Additional equired
City & State	9	William Committee of the Committee of th	City & State		/		6. Election Campaign Financing		\$5.00	May Be
23	Com	28	28					<u> </u>		to Fees
24) 24)	25	29	29 30				8. This corporation owes or has paid. Personal Property Tax due June 30	o. 🗀	Yes [angibl e No
	 Name and Add STELLANO, JOHN 	ress of Current Regist	ered Agent	81	Name		10. Name and Address of New Regis	stered A	gent	2
	55 SE 9TH STREET			<u> </u>						
	RT LAUDERDALE F	L 33316		82	Street A	Addres	ss (P.O. Box Number is Not Acceptable)	}		
				83						
				84	City			EI	85 Zip (Code
11. Pursuant to office or reagent. I ar	to the provisions of Sa egistered agent, or bo m familiar with, and ac	ctions 607.0502 and 60 th, in the State of Flond copt the obligations of,	7.1508, Florida Statute: a. Such change was at Section 607.0505, Flor	s, the abov ithorized b Ida Statute	e-named o y the corp s.	corpor	ration submits this statement for the purn's board of directors. I hereby accept t	_ 4 == _	changing it intment as	s registered registered
SIGNATURE	Vonature, typed or printed ha	ne of registered agent and title	applicable (Nr)16	Hegistered Ag	ent signature	required	when reinstating)	DATE		
12,		OFFICERS AND DIREC		13.			ADDITIONS/CHANGES TO OFFICER		DIRECTOR	S IN 12
TITLE	DP	A	L DELETE	1.1 ITTLE				Ţ.	Change	Addition
NAME	CASTELLANO, J 1755 SE 9TH S1			1.2 NAME						
STREET AUDINESS CITY-ST-ZIP	FORT LAUDERD			13 STREE	T ADDRESS					
fille			L) DELETE	2.1 TITLE	11-71				Change	Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREET	T ADDRESS					
CRY-SI-ZIF			DELETE	2.4 CHY-	ST-7IP			·	Change	Addition
Tible Name			C DETRIE	3.1 TITLE 3.2 NAME				š	Change	Magazian
STREET AODRESS				W.	I ADDRESS					
CITY-ST-ZIP				54. UITY+						
lure			DELETE	4.1 TITLE					Change	Addition
NAME				4.2 NAME	İ					
STREET ADDRESS				4.3 STREET	1					
CITY-SI-ZIP TITUL			DELETE	44 CHY-1	31-/IP		1,1,2,3	r	Change	Addition
NAME			**************************************	52 NAME	{			-		amer . , . are all
STREET AUDRESS				N	FADDRESS					

5.4 CHY-51-ZIP

61 TITLE

6.2 NAME

CITY-ST-ZIP

fille NAME

STREET ADDRESS

CITY-ST-ZIP

14. I hereby contriby that the information supplied with this filling does not evaluate the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental arrival eport is tree 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 of trustee and officers in powered to accurate any signature of the corporation of the receiver of

DELETE

Change Addition