## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5,50.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000032580 (1)

THE J	BS GROUP, INC.				
Principal Pla	ce of Business	Mailing Address		I IMBELORA HO SOSOS HISH ODEKA BOKA OBAH ODI	DE HIND HART BAND I DINE ORIC SEDE
7040 WEST PALMETTO PARK ROAD SUITE 118 BOCA RATON FL 33433 7040 WEST PALMETTO PA SUITE 118 BOCA RATON FL 33433				DO NOT WRITE IN T	HIS SPACE
				04/28/1993	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0405304	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	do 🗸	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	
	9. Name and Address of Curre	nt Registered Agent	1301	10. Name and Address of New Registe	
70 S1	RAKOW, LARRY Y 040 W. PALMETTO PARK RD. 1E. 118 OCA RATON FL 33433		81 Name 82 Street Add 83 City	dress (P.O. Box Number is Not Acceptable)	<b>■∎ 85</b> Zip Code
			[-],		- L   '
11. Pursuant office or agent. La	rto the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607,1508, Florida Stat e of Florida. Such change was pations of, Section 607,0505, I	utes, the above-named cor s authorized by the corpora Florida Statutes.	poration submits this statement for the purpo ation's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE					
12.	Signature, typed or proded name of registered as CELICERS AN	e of and fine if applicable (No ID DIRECTORS	OII Registered Agont signature requi	ured when reinstaling) DA ADDITIONS/CHANGES TO OFFICERS	
TITLE	O PRESIDENT	DELETE		VICE - PRESIDENT	Change Addition
NAME	KRAKOW, LARRY Y	-	1.2 NAME	1200100101	
STREET ADDRESS	22181 TRILLIUM WAY		1.3 STREET ADDRESS	$\rightarrow$	
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY - ST - ZIP		
TITLE	POBERT M. TOR	Attow DELETE			Change Addition
STREET ADDRESS	6916 ( 121.6	+116	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOLA RATON, F	-L 33433	2. 4 CITY-ST-ZIP		
TITLE		☐ DELFTE	3.1 TITLE		Change Addition
THAME	İ		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME	<u> </u>		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
			<b>■</b> 1		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Driese	54 CITY - ST - ZIP		Change Labor
		DELETE			Change Addition

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 suppliemental 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 trusted 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 without address.