

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000054969 (9)

1. Corporation Name

WJM&G ASSOCIATES, INC.



Principal Place of Business

Mailing Address

1019 LINCOLN ROAD
MIAMI BEACH FL 33139
US

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MIAMI BEACH FL 33139
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/02/1993

4. FEI Number

65-0428317

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 900 LINCOLN ROAD
Suite, Apt. #, etc.

26 900 LINCOLN RD.
Suite, Apt. #, etc.

22 City & State

23 MIAMI BEACH, FL

24 33139

25 USA

27 City & State

28 MIAMI BEACH, FL

29 33139

30 USA

9. Name and Address of Current Registered Agent

CHABY, STEVEN
600 N.E. 36TH STREET, #1517
MIAMI FL 33139

10. Name and Address of New Registered Agent

81 Name

MANAL OLIVER

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

3121 Sheridan Ave.

MIAMI BEACH

FL

85 Zip Code

33140

11. 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.

SIGNATURE

MANAL OLIVER

Manal Oliver

4-30-98

Signature, typed or printed name of registered agent and the filer, not

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P
HAGOOD, MARK
1671 MICHIGAN AVENUE
MIAMI BEACH FL 33139

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

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13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PRESIDENT
HAGOOD, MARK
900 LINCOLN ROAD
MIAMI BEACH, FL 33139

☒ Change ☐ Addition

Address

☐ Change ☐ Addition

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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 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:

Mark S. Hagood PRESIDENT

4/6/98

CR2E034 (10/97)