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 # P93000062037 (5)

JIL ASSOCIATES, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addre	ss			T 100 LEGGY 1510 (1918) 4 FINE OR 151 BRIEF BRIE	1110 HBH 05130 11	(d) (00) (00)
3099 COMMERCIAL BLVD. 3099 COMMERCIAL BLVD								
SUITE 200 SUITE 200 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 3						DO NOT WRITE IN THIS	S SPACE	
11. 0.002.10	ALE 1 C 00000	TT. ENODERO	ALL TE GOOD			3. Date Incorporated or Qualified		·
1						08/31/1993		
	lace of Business	2a. Mailing Ad	2a. Mailing Address			4. FEI Number	Aı	oplied For
21		26	· · · · · · · · · · · · · · · · · · ·			65-0480942		ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	T T	Additional
City & State	Δ	City & Stat	City & State					equired
23	•	—¬ ·	28			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip Country		Zip			y	8. This corporation owes or has paid the c		 [
24	25 29		30	30		Personal Property Tax due June 30. 🔲 Yes 🔯 No		
	9. Name and Address of Cu	rrent Registered Agen	l .		T	10. Name and Address of New Registered	J Agent	
	SIAS, STEVEN L ESO			81	Name			
	99 E. COMMERCIAL BLVD.		83		Street Add	ress (P.O. Box Number is Not Acceptable)		
	ITE 200			83				
[FI.	LAUDERDALE FL 33308							
				84	City	F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508. Fic	rida Statutes, the	abov	L e-named con	poration submits this statement for the purpose		ts registered
l office or r	egistered agent, or both, in the S	tate of Florida. Such ch	ange was authoriz	ed b	v the corpora	tion's board of directors. I hereby accept the ap	pointment as	registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registere					ent signature requ	rod when reinstating) DATE		
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	DPS Latner, Joshua I	LJ		TITLE			☐ Change	☐ Addition
NAME	1121 CRANDON BLVD			NAME				
STREET ADDRESS CITY-ST-ZIP	VEV BIOCAVAIC CI		1.3 STREET ADDRESS					İ
TITLE	DELETE			1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition
NAME			2.2	2.2 NAME			- •	
STREET ADDRESS			2.3 S		I ADDRESS			1
CITY-ST-ZIP			2. 4	ÇITY-	ST - ZIP			
TITLE	,		DELETE 3.1	TITLE			☐ Change	☐ Addition
NAME			3.2	NAME				
STREET ADDRESS			-		ADDRESS			
CITY-ST-ZIP		—————— —			ST-ZIP		Chan-	Addition
TITLE NAME				TITLE NAME			L Change	C Addition
STREET ADDRESS					F ADORESS			ŀ
CITY-ST-ZIP				CITY-S				
TATLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME				NAME			-	
STREET ADDRESS			5.3	STREET	ADDRESS			
CITY-ST-ZIP				CITY-S	ST-ZIP		·· •	
TITLE		\sim $^{-}$	DELETE 6.1	TITLE			Change	Addition
NAME		//		NAME				
STREET ADDRESS		V			ADDRESS			
CITY-ST-ZIP			6.4	CITY-S	ST-ZIP			

14. Thereby certify that the information supplied with this tiling 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 13 if changed, or on an attachment with an address.

Joshua Latner Joshua Latner

Director

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