FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 APR 27 AM 7:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000078712 (5)**

1. Corporation Name
J-RAND FINANCIAL CORPORATION

Principal Place of Business	Mailing Address
14620 N. NEBRASKA AVE. BUILDING C TAMPA FL 33613	14620 N. NEBRASKA AVE. BUILDING C TAMPA FL 33613

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/15/1993
3a. Date of Last Report: 05/01/1994

	Principal Place of Business	Mailing Address
2. / 2a.	21 8401 J.R. Manor Dr.	26 8401 J.R. Manor Dr.
Suite, Apt. #, etc.	22 STE 100	27 STE 100
City & State	23 Tampa, Fla	28 Tampa Fla
Zip / Country	24 33634 25 USA	29 33634 30 USA

4. FEI Number: 59-3212528 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

MCMICHAEL, WALTON H
777 HARBOUR ISLAND BLVD. SOUTH
SUITE 850
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 8401 J.R. MANOR DR. STE 200
83
84 City: TAMPA FL 85 Zip Code: 33634

11. Pursuant to the provisions of Section 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: _____ 4/18/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☑ Change ☐ Addition
NAME	MCMICHAEL, WALTON H	1.2 NAME		
STREET ADDRESS	777 HARBOUR ISLAND BLVD. SOUTH, STE 850	1.3 STREET ADDRESS	8401 JR Manor Drive	
CITY-ST-ZIP	TAMPA FL 33602	1.4 CITY-ST-ZIP	Tampa, FL 33634	
TITLE	D	2.1 TITLE		☑ Change ☐ Addition
NAME	SUAREZ, JACK D	2.2 NAME		
STREET ADDRESS	14620 N. NEBRASKA AVE., BLDG. C	2.3 STREET ADDRESS	8401 JR MANOR DRIVE	
CITY-ST-ZIP	TAMPA FL 33613	2.4 CITY-ST-ZIP	TAMPA, FL 33634	
TITLE	D	3.1 TITLE		☑ Change ☐ Addition
NAME	BRADEN, RANDALL	3.2 NAME		
STREET ADDRESS	14620 N. NEBRASKA AVE., BLDG. C	3.3 STREET ADDRESS	8401 JR MANOR DRIVE	
CITY-ST-ZIP	TAMPA FL 33613	3.4 CITY-ST-ZIP	TAMPA, FL 33634	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: _____ 4/18/95 813/249-0588
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000050 CF