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 #

P9400007252 (7)

JM FINANCIAL GROUP, INC.

Principal Place of Business Mailing Address 1007 N FEDERAL HWY 1007 N FEDERAL HWY SUITE 125 SUITE 125 FT LAUDERDALE FL 33304 DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33304 3. Date Incorporated or Qualified 01/20/1994 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0512323 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional

5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Ζıp Country This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FANIZZI, MARY 1007 N FEDERAL HWY 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 125** 83 FT LAUDERDALE FL 33304 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ... Change Addition TITLE 1.1 TITLE FANIZZI, MARY NAME 1.2 NAME 1007 N. FEDERAL HWY # 25 STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-7IP 1.4 CITY-ST-ZIP HE A. Whiddon, Jr. Change DELETE 2.1 TITLE Addition TITLE 2.2 NAME 1627 SE 9+0 Street STREET ADDRESS 2.3 STREET ADDRESS H. Land IL CITY-ST-ZIP 2. 4 CITY-ST-ZIP NOW PRESIDENT DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME mary Farizici 1007 N. Rederal Huy #125 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ■ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 chy attachment with an address.

CICNATIBE:

CITY-ST-ZIP

3/3/98

954.568.3838

FILED

Mar 10 1998 8:00am

Secretary of State