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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000013182 (8)

JEMGAM CORPORATION

Principal Place of	Business
Ann	

Mailing Address

FILED Apr 18 1997 8:00am Secretary of State



2911 N.E. 40TH LIGHTHOUSE P				11 N.E. 40TH COURT 3HTHOUSE PT. FL 33	064-8465						
\$ -								3. Date Incorporated or Qualified 02/17/1994	,	e of Last R 6/1996	Report
2. Principal Place of Business			28.	2a. Mailing Address			4. FEI Number	- 		oplied For	
21			26	26				65-0467317		No	ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				Codificate of Chattan Desired		\$8.75	Additional
22			27	27			5. Certificate of Status Desired		Fee Re	equired	
City & State				City & State				6. Election Campaign Financing		\$5.00	May Be
23			28					Trust Fund Contribution		Added	
Zip		Country		Zip Cou				8. This corporation has liability for intangible tax under s. 199.0:			199.032,
24		25	29	29 30				Florida Statutes			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent											
MCL	AUGHLIN, (GREGORY A				81	Name				}
2911 N.E. 40TH COURT					82	Street Ad	Idress (P.O. Box Number is Not Acceptab	lo\	·		
LIGH	ITHOUSE P	T. FL 33604					Chicarra	diese p.co. Box (rambel is 110) Acceptad	(0)		
						83					
Ĭ.	•				1					· · · · · · · · · · · · · · · · · · ·	
e.					'	84	City		FL	85 Zip (Code
11. Pursuant t	to the provision	ens of Sections	507.0502 and 60 ne State of Florida	07.1508, Florida Stat da Such change was	utes, the al	hove d by	-named co the corpor	rporation submits this statement for the p ration's board of directors. I hereby accep	urpose of o	:hanging it intment as	ts registered registered
	III Iailiiai y	n, and accept to	o doligandris di			uies	i.				į
SIGNATURE	Signature, typed o	or lo ame of rec	stered agent and title	flabolicable (N	OIL flegisters	o Apei	nt sonature fee	puired when reinstating)	DATE		
12.			RS AND DIREC		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12
TITLE	DP			DELETE	1.1 1	ill.				Change	Addition
NAME	MCLAUGH	ILIN, JAMES E	:		1.2 N/	AME	1			_	
STREET ADDRESS	2651 NE						ADDRESS				
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064				1.4 CITY - \$1 - ZIP						}
TITLE	DIS DELETE 2.11					***************************************		Change	Addition		
NAME	MOLALIONINI OPEOODY A					- 1		•			
STREET ADDRESS	AAA				2.2 NAME 2.3 STREET ADDRESS						
CITY-ST-ZIP	LIAISTIALIAE ABAUT EL AAAAI				2 4 CHY-S1-74P						
TITLE				3111					Change	Addition	
*NAME					3.2 N/						/Idoition
STREET ADDRESS							ADDRESS				1
CITY-ST-ZIP					•	ince),	- (1
TITLE				DELETE	4.1 Ti		1- 70°		r	Change	Addition
NAME					4.2 N				·		Noullon
1							ADDDCCC				1
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP TITLE			······································	DELETE		HY-\$1	1 - 2 +1			Change	Addition
				[_] M(t)L	5.1 11				Ĺ	Change	Addition
NAME					5.2 NA						İ
STREET ADDRESS							ADDRESS				}
CITY-ST-ZIP	******			DELETE		<u> 17 - 51</u>	- 7(P			10	
TITLE				☐ DELETE	61 11				L	Change	☐ Addition
NAME					62 N/		ļ				ļ
STREET ADDRESS					6.3 ST	IRCET A	ADDRESS				
CITY-ST-ZIP						1Y-\$1					
.14. I do hereb	y certify that	the information	supplied with th	is filing doos not qua	alify for the	exer	nption state	od in Section 119.07(3)(i), Florida Statutes	. I further o	ertify 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 lam an officer or director of the corporation of 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 atlachment with an address.