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 #

P94000026362 (1)

JOUY	JEM, ING.							
Principal Plac	ce of Business	Mailing Address					iko kidha arida ikida di	AND REPORTED
		SUITE 303 BOYNTON BEAC	1200 S FEDERAL HWY SUITE 303 BOYNTON BEACH FL 33435			DO NOT WRITE IN THIS SPACE		
US		US				3. Date incorporated or Qualified		
6 Principal (Place of Business	2a, Mailing Addr	350			04/06/1994 4. FEI Number		t F
2. Principari 21	Place of Business	26, Mailing Abor	uss					pplied For lot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #,	etc.			65-0489195	60 7E	Additional
22	·	27				5. Certificate of Status Desired		equired
City & Sta	to	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution) Added	to Fees
— Zip	Country	7(p	├ ──┐	Country	<i>(</i>	8. This corporation owes or has paid th		
24	9. Name and Address of Curre	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registe		No
		ent Registered Agent		81	Name	TO, Maine and Address of New Pogiste	Ned Wallt	
	ES JODESTY			Ŀ				
20281 N.W. 8TH STR. PEMBROKE PINES FL 33029				82	Street Add	lress (P.O. Box Number is Not Acceptable)		
rc	MONORE PINES PL 33028			83				
				-			121 42	
				84	City		FL 85 Zip	Code
SIGNATURE	Signature, typed or pentled name of argestered a				ent signature requ		ATE	
12.	·	ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D NODECTIV NATES	☐ DE		1 TITLE			☐ Change	Addition
NAME	JODESTY, YVES			.2 NAME	1 4 D D D C C C			
STREET ADDRESS	20281 N.W. 8TH ST. PEMBROKE PINES FL 3302	7			ADDRESS			
CITY-ST-ZIP TITLE	D	/ DE		4 CITY-S	51-2IP		Change	☐ Addition
NAME	JODESTY, JENNIFER	ى د	-	2 NAME				
STREET ADDRESS	20281 N.W. 8TH ST.		4		ADDRESS			,
CITY-ST-ZIP	PEMBROKE PINES FL 3302	7		4 CITY-				
TITLE		□ DE		1 TITLE			Change	☐ Addition
NAME			3	2 NAME	}			
STREET ADDRESS			3.	.3 STREET	ADDRESS			
CITY-ST-ZIP				4. CITY-	ST-ZIP	, <u> </u>		
TITLE	Į.	□ DE		1 TITLE			☐ Change	Addition
NAME				. 2 NAME				
STREET ADDRESS	1		1 "		ADDRESS			
CITY-ST-ZIP TITLE		DE		4 CITY-S 1 TITLE	51 - ZIP		Change	Addition
NAME		ان در	1 1	2 NAME	}		ELI CHANGO	
STREET ADDRESS	{				ADDRESS			
CITY-ST-ZIP				4 CITY-S	1			
#111 F	 	T NE					Change	Addition

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 attraction with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Mar 09 1998 8:00am

Secretary of State