## 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

POCUMENT # P9400046127 (4)

JIM BAY DESIGNS, INC.

## FILED Jan 29 1998 8:00am Secretary of State



Principal Plac	e of Business	N	Mailing Address						- I ABBIJADI JID IBIJI BIBIJ BOJIJ BOJIJ BOJIJ BOJIJ BIJIJ BIJIJ BIJIS BIJBI JIDJI JORI JIDJI						
9740 SW 123 ST					9740 SW 123 ST					i					
MIAMI FL 33176				MIAMI FL 33176						DO NOT WRITE IN THIS SPACE					
										l	3 (	Date Incorporated or Qualified		SPACE	
												05/30/1994	•		
2. Principal P	lace of Busin	ess	·····	28	. Mailing	Address						FEI Number			Applied For
21 701		911	steet	26	ا							65-0501904			Not Applicable
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.									\$8.7	5 Additional	
22				27							<b>5.</b> (	Certificate of Status Desired	Ш	Fee	Required
City & Stat		FL			City & State						<b>6</b> . E	Election Campaign Financing		<b>\$5.0</b>	O May Be
23 MIPM	NI			28	_ <u></u>						1	Trust Fund Contribution		Adde	d to Fees
Zip 241 331		Cou	niry <b>ሁኒ</b> ፉ	<u> </u>	Ζιρ		<del></del>	intry				This corporation owes or has			
24 3 31		25	dress of Curre	29	eternd An	ent.	30					Personal Property Tax due Ju Name and Address of New I		Yes	□ No
DC			nt riogn	arai an wa	10111	81	Nam	e	10. 1	Haille alla Augress of Hear	Johistolen	Agent			
	RASINGTON,														
9740 <b>S</b> W 123 ST Miami Fl 33178									Stree	et Addres	ss (P.0	<ul> <li>O. Box Number is Not Accept</li> </ul>	able)		
MI	MMI PL 331	10						83							
								Ш							
								B4	City				FL	85 Z	ip Code
11. Pursuant	to the provision	ons of S	ections 607.050	)2 and 6	607.150B.	Florida St	atutes, the a	bove	-name	d corpor	ration	submits this statement for the	purpose c	f changing	a its registered
office or r	registered age	ent, or b	oth, in the State	of Flori	ida. Such	change w	ras authorize Etorida Sta	d by	the co	orporation	n's bo	pard of directors. I hereby acc	ept the ap	oointment	as registered
-	ATT TOUT THE	ii, aiia e	roop, the cong	juliono c	J., 00011011	001.0000	, r ionaa ota	idioi							
SIGNATURE	Signature, typed to	or printed n	ame of registered ag	ent and tilk	e il applicable	i	(NOTE: Registere	d Age	nt signati	ure required	when re	einstating)	DATE		
12.			OFFICERS AN	D DIRE	CTORS		13.				Α[	DDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	DPT				l	DELETE	1.1 Ti	TLE						L Chang	e L.) Addition
NAME			JOHN L JR.				1.2 N	AME							
STREET ADDRESS	9740 SV		51		1.3 \$1				ADDRES:	3					
CITY-ST-ZIP	MIAMI F	<u> </u>				DELETE		ITY-S	T-ZIP	——					
TITLE	VS	TAN	04AIT0 1 0AI		į	DELETE	2.1 1							Chang	e 🔲 Addition
NAME			CANTILLON				2.2 N								
STREET ADDRESS	9740 SV		ופּע						ADDRESS	·					
CITY-ST-ZIP TITLE	MIAMI F	<u> </u>	<del></del>			DELETE	2. 4 U	TIE	1 - ZIP					Chang	e 🔲 Addition
NAME							3.1 H							- Vitaliy	- Li Modilion
STREET ADDRESS	}								ADDRESS						
CITY-ST-ZIP								ITY-S		<u> </u>					
TITLE	<del>-</del>		<del> </del>		T	DELETE	4.1 TI		1 411	+-				Chang	e 🔲 Addition
NAME					_		4. 2 N								
STREET ADDRESS									ADDRESS	3					
CITY-ST-ZIP								ITY-S							
TITLE						DELETE	5.1 TI			$\top$				Chang	e 🔲 Addition
NAME							5.2 N	<b>AME</b>							
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CITY-ST-ZIP					·		5.4 CI	TY- \$1	r-ZiP						
TITLE						DELETE	6.1 TI	TLE						☐ Chang	e Addition
NAME							6.2 N	<b>AME</b>							
STREET ADDRESS							6.3 S	TREET	ADDRESS	5					
CITY-ST-ZIP	l		·					TY-S							
14. I hereby o	certify that the	informe	ation supplied v	uth this:	Mino closs	<del>contrau</del> ali	ity for the eye	amnt	ion sta	ited in Se	action	r 119.07(3)(i). Florida Statutes	. I further ce	artify that t	ne information

In 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 is supplied and 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 of the receiver of 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 any attachment with an address.

CIONATURE

1/19/99

215-5929