

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 18 PM 2:51

DOCUMENT # P94000090365 (5)

1. Corporation Name

JAGESB, INC.

Principal Place of Business

**21094 SWEETWATER LANE NORTH
BOCA RATON FL 33428**

Mailing Address

**21094 SWEETWATER LANE NORTH
BOCA RATON FL 33428**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

23-2235924

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing

☐ **\$5.00 May Be
Added to Fees**

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name BUCKWALD EDWARD
82 Street Address (P.O. Box Number is Not Acceptable) 21094 SWEETWATER LANE NORTH
83
84 City BOCA RATON FL 85 Zip Code 33428

11. Pursuant to the provisions of Sections 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

Edward Buckwald

1/10/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE P
2. NAME BUCKWALD, EDWARD
3. STREET ADDRESS 21094 SWEETWATER LANE NORTH
4. CITY- ST- ZIP BOCA RATON FL 33428

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 its authorized agent or authorized agent empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an authorized agent with no address.

SIGNATURE:

Edward Buckwald
EDWARD BUCKWALD

1/10/95 407 483 5050