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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9500003050

1. Corporation Name

JMC MULTI SERVICES, INC.

| Principal | Place of | Business |
|-----------|----------|----------|

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90056 040 \*\*\*150.00



| 289 W. SURRISE RVO FT. LAUDEROALE FL 33311  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  0.108/1995  2. Principal Place of Business 2. Adaing Address 2. Entropeal Place of Business 2. Softe, Apt. #, etc. 2. City & State 2. City & State 2. City & State 3. Confidence of Status Desired   \$8.75 Additional Fee Required 2. City & State 3. City & State 4. City & State  | Principal Place of Business Mailing Address      |  |                                  | I INDITIONAL TITA INCOME DESIT MATTER MATERIAL M |              |  |
|---|--|--|----------------------------------|--|--------------|--|
| FI. LAUDERDALE FI. 33311  FI. LAUDERDALE FI.  | •  |  |                                  |  |              |  |
| 2. Principal Place of Business   2a Mailing Address   4. FEI Number   Applied For Stute, April 4, etc.   Sulte, April 5, etc.   Sulte, April 5, etc.   Sulte, April 5, etc.   Sulte, April 6, etc.   Sulte, April 6, etc.   Sulte, April 6, etc.   Sulte   | 2895 W. SUNRISE BLVD.<br>FT. LAUDERDALE FL 33311 |  |                                  |  |              | DO NOT WRITE IN THIS SPACE   |
| 2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Application   Application   Not Applicable   Suite, April. etc.   28   Suite, April. etc.   Suite, April.   |  |  |                                  |  |              |  |
| 2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   School 1589   State   Applied For   School 1589   State   School 1589   State   School 1589   State   School 1589   State   State   State   School 1589   State   State   School 1589   State   State   State   State   State   State   School 1589   State   Sta  |  |  |                                  |  |              | 1  |
| Suite, Apt. 8, etc.    2  | 2. Principal Pl                                  | ace of Business                          | 2a. Mailing Address              |  |              |  |
| Suite, Apt. #, etc.   27   27   27   5. Certificate of Status Desired   \$5.07 Additional   \$6. Election Campaign, Financing   \$5.00 Mary Bit   \$5.00 Mary Bit |  |  | <u> </u>                         |  |              | 65-0021589 Not Applicable  |
| City & State  |  | #. etc.                                  |                                  |  |              | \$8.75 Additional  |
| City & State   City & State   28   29   29   20   29   20   20   20   20  | 22   | ., 5.12.                                 | <b>—</b>                         |  |              | E Contitonto of Status Decised   |
| Added to Fees   Added to Fee  |  | 3  |                                  |  |              | 6. Election Campaign Financing \$5.00 May Be                                     |
| Zip   Country   Zip   30  | 23   |  | 28                               |  |              |  |
| 9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  WILLIAMS, JOHN A 2285 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  83  84 City FL 85 Zip Code  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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of. Section 907,0505, 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. Thereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of officions. Thereby accept the purpose of changing its registered office or registered agent of both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of registe  |  | Country                                  | <del></del>                      | Country  | /            | 8. This corporation owes the current year Intangible                             |
| WILLIAMS, JOHN A 2895 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  11. Name and Address of New Registered Agent  WILLIAMS, JOHN A 2895 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  12. Street Address (P.O. Box Number is Not Acceptable)  13. Street Address (P.O. Box Number is Not Acceptable)  14. City  FL 85 Zip Code  15. Pursuant to the previsions of Sections 607,0502 and 607,1508, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. of 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 50, 505, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent. I am familiar with, and accept the obligations of Section 50, 505, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 50, 505, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 50, 505, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and store accept the obligations of Section 50, 505, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and store accept the depletion of the purpose of changing its registered and store accept the submits this statement for the purpose of changing its registered accept the depositions of the purpose accept the purpose of changing its registered and store accept the purpose of changing its registered accept the purpose of changing its registered accept the purpose of changing its registered accept the purpose of changing its   | 24   | 25                                       | 29 30                            | ดี   |              |  |
| WILLIAMS, JOHN A 2895 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  32 Street Address (P.O. Box Number is Not Acceptable)  33 Street Address (P.O. Box Number is Not Acceptable)  34 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the aboven-named corporation submits this statement for the purpose of changing its 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, and an implication of the composition's board of directors. I hereby accept the appointment as registered agent aminist in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent   |  |  |                                  |  |              | 10. Name and Address of New Registered Agent                                     |
| 2895 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  32   |  |  |                                  | 81   | Name         | e  |
| 2895 W. SUNRISE BLVD.  FT. LAUDERDALE FL 33311  83  44 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal 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 607.5056, Floridal Statutes.  SIGNATURE  Signature, typical quality of priced flume of regulated agent and title if septiations. (NOTE Replaced Agent signature required when reinstance)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIME  PTD  OFFICERS AND DIRECTORS  13. THE CONTROLL AND CHANGES TO OFFICERS AND DIRECTORS IN 12  12 YAME  SIRRET ADDRESS  OITY-51-2P  TILL AUDERDALE FL 33311  VEX. SUMRISE BLVD.  FT. LAUDERDALE FL 33311  DELETE  13 TITLE  14 CITY ST. 2P  14 CITY ST. 2P  15 TITLE  WILLIAMS, JOHN A  22 YAME  23 STREET ADDRESS  OITY-51-2P  TITLE  OELETE  31 TITLE  32 STREET ADDRESS  OITY-51-2P  TITLE  OELETE  41 TITLE  OELETE  41 TITLE  OELETE  41 TITLE  OELETE  33 STREET ADDRESS  OITY-51-2P  TITLE  OELETE  51 TITLE  O  | WILL   | iams, John a                             |                                  | 92   | Chanat       | A Address (D.O. Boy Number is Not Assentable)                                    |
| 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 agent, or both, in the State of Florida. Such change was author/coxed by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes.    Signature, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.   Signature, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.   Signature, I am familiar with, and accept the obligations of the purpose of change was author/coxed by the corporation's board of directors. I hereby accept the appointment as registered agent or accept the appointment as registered agent or accept the obligations of the corporation's board of directors. I hereby accept the appointment as registered agent or accept the appointment as registered agent or accept the obligations of the corporation's board of directors. I hereby accept the appointment as registered agent or accept the appointment as registered agent or accept the obligations of the corporation's board of directors. I hereby accept the appointment as registered agent or accept the accept the corporation of accept the co  | 2895   | W. SUNRISE BLVD.                         |                                  | 82   | Street       | If Address (P.O. Box Number is Not Acceptable)                                   |
| 11. Pursuant to the provisions of Sections 807 0502 and 807 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, 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, or both, in the State of Florida. Statutes.  SIGNATURE  SIGNATURE  Signature, typed or private name of impastend agent and table it septiates.  NOTE Registered Agent agent agent agent and table it septiates.  NOTE Registered Agent age  | FT. L  | AUDERDALE FL 33311                       |                                  | 83   | 1            |  |
| 11. Pursuant to the provisions of Sections 807 0502 and 807 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, 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, or both, in the State of Florida. Statutes.  SIGNATURE  SIGNATURE  Signature, typed or private name of impastend agent and table it septiates.  NOTE Registered Agent agent agent agent and table it septiates.  NOTE Registered Agent age  |  |  |                                  |  |              |  |
| 11. Pursuant to the provisions of Sections 607 (592) and 607 1508, Fiorida 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 suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent in a final minimal with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PTD  WILLIAMS, VERDIE M  STREET ADDRESS  TITLE  VSD  WILLIAMS, VERDIE M  STREET ADDRESS  WILLIAMS, JOHN A  2895 W. SUNRISE BLVD.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LYONE  WILLIAMS, JOHN A  2895 W. SUNRISE BLVD.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LYONE  WILLIAMS, JOHN A  2895 W. SUNRISE BLVD.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LYONE  WILLIAMS, JOHN A  2895 W. SUNRISE BLVD.  22 NAME  23 STREET ADDRESS  WILLIAMS, JOHN A  2895 W. SUNRISE BLVD.  24 CMTY-ST-2P  TITLE  DELETE  31 TITLE  DELETE  31 TITLE  DELETE  41 TITLE  DELETE  33 STREET ADDRESS  CMTY-ST-2P  TITLE  DELETE  41 TITLE  DELETE  51 TITLE  DELE  |  |  |                                  | 84   | City         | FI 85 Zip Code   |
| office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and marked from the minimum of megatered agent and title if applicable.    Signature (Note Registered Agent signature required when reinstating)   DATE  | 44 Dureuant                                      | to the provisions of Sections 607.0503   | 2 and 607 1508 Florida Statutes  | the abov   | e-named      | of corporation submits this statement for the purpose of changing its registered |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PTD   DELETE   11 TITLE   DELETE   12 MAME   DELETE   DELET  | office or re                                     | egistered agent, or both, in the State o | of Florida. Such change was auth | orized by  | the corp     | poration's board of directors. I hereby accept the appointment as registered     |
| 12.   | SIGNATURE  |  | *****                            |  |              | DATE   |
| TITLE NAME PTD WILLIAMS, VERDIE M 2895 W. SUNRISE BLVD. FT. LAUDERDALE FL 33311  VERDIE ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  DELETE  DELETE  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2.1 TITLE 2.2 NAME 2.2 NAME 2.2 NAME 2.2 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP  DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP  DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP  DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP  DELETE 5.3 STREET ADDRESS CITY-ST-ZIP  Change Addition Change Change Addition Change Ch  |  | <u> </u>                                 |                                  |  | nt signature | o requires minimum (   |
| WILLIAMS, VERDIE M 2895 W. SUNRISE BLVD. CITY-ST-ZIP TITLE VSD WILLIAMS, JOHN A STREET ADDRESS COTY-ST-ZIP TITLE VSD WILLIAMS, JOHN A STREET ADDRESS COTY-ST-ZIP TITLE USBS W. SUNRISE BLVD. CITY-ST-ZIP TITLE USBS W. SUNRISE BLVD. CHANGE USBS W. SUNRISE USBS W. SUNRISE BLVD. CHANGE USBS W. SUNRISE USBS W. S  |  |  |                                  |  | ···          |  |
| STREET ADDRESS CITY-ST-ZIP TITLE VSD WILLIAMS, JOHN A STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33311  DELETE VSD WILLIAMS, JOHN A STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33311  DELETE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS   |  | · ·=                                     |                                  |  |              |  |
| TITLE VSD WILLIAMS, JOHN A 22 MANE 22 MANE 22 MANE 22 MANE 33 STREET ADDRESS CITY-ST-ZIP DELETE 3.1 TITLE 22 MANE 32 STREET ADDRESS CITY-ST-ZIP DELETE 4.1 TITLE 4.2 MANE 32 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE 4.2 MANE 32 STREET ADDRESS CITY-ST-ZIP DELETE 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP DELETE 6.3 STREET ADDRESS  |  |  |                                  |  | T 4000000    |  |
| TITLE VSD WILLIAMS, JOHN A 22 NAME 23 STREET ADDRESS CITY-ST-ZIP  |  |  | /                                |  |              | »  |
| DELETE   DELETE   STITLE   DELETE   STITLE   DELETE   STITLE   DELETE   STREET ADDRESS   |  |  | (DOE) ETE                        |  | ST-ZIP       | Ali II Zono Vanlia M Pichange [] Addition  |
| DELETE   DELETE   STITLE   DELETE   STITLE   DELETE   STITLE   DELETE   STREET ADDRESS   |  |  | CA DECETE                        |  |              | Williams, lergie ic Bud  |
| DELETE   DELETE   STITLE   DELETE   STITLE   DELETE   STITLE   DELETE   STREET ADDRESS   | NAME   |  |                                  |  |              | 2895 M. SURrise DIVO.  |
| DELETE   DELETE   STITLE   DELETE   STITLE   DELETE   STITLE   DELETE   STREET ADDRESS   | STREET ADDRESS                                   |  |                                  | 2.3 STREE  | TADDRESS     | 8 Ft. Ldle,, FU 33311  |
| NAME  | CITY-ST-ZIP                                      | FT. LAUDERDALE FL 33311                  |                                  |  | ST-ZIP       | V-5  |
| STREET ADDRESS   3.3 STREET ADDRESS   3.4. CITY-ST-ZIP  | TITLE  |  | ☐ DELETE                         | 1  |              | ☐ Change ☐ Vigilion  |
| 34, CITY-ST-ZIP   34, CITY-ST-ZIP     Change   Addition   Change   Addition  | NAME   |  |                                  | 3.2 NAME   |              |  |
| TITLE   | STREET ADDRESS                                   |  |                                  | 3.3 STREE  | TADDRESS     | s  |
| NAME  | CITY-ST-ZIP                                      |  |                                  |  | ST-ZIP       |  |
| A3 STREET ADDRESS   | TITLE  |  | ☐ DELETE                         | 4.1 TITLE  |              | ☐ Change ☐ Addition  |
| Addition  | NAME   |  |                                  | 4. 2 NAME  |              |  |
| TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY- ST-ZIP         5.4 CITY- ST-ZIP           TITLE         Change         Addition           NAME         6.1 TITLE         Change         Addition           STREET ADDRESS         6.3 STREET ADDRESS   | STREET ADDRESS                                   |  |                                  | 4.3 STREE  | TADDRESS     | ıs   |
| SZ NAME   | CITY-ST-ZIP                                      |  |                                  | 4.4 CITY-5   | ST-ZIP       |  |
| 5.3 STREET ADDRESS  | TITLE  |  | ☐ DELETE                         | 5.1 TITLE  |              | ☐ Change ☐ Addition  |
| SA CITY-ST-ZIP  | NAME   |  |                                  | 5.2 NAME   |              |  |
| DELETE  | STREET ADDRESS                                   |  |                                  | 5.3 STREE  | TADDRESS     | is   |
| TITLE         .         DELETE         6.1 TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         6.3 STREET ADDRESS   | CITY-ST-ZIP                                      |  |                                  | 5.4 CITY-5   | ST-ZIP       |  |
| STREET ADDRESS 6.3 STREET ADDRESS   | TITLE  | •  | ☐ DELETE                         | 6.1 TITLE  | •            | ☐ Change ☐ Addition  |
| STREET ADDRESS 6.3 STREET ADDRESS   | NAME   |  |                                  | 6.2 NAME   |              |  |
| CACITY CT. 7ID  | STREET ADDRESS                                   |  |                                  | 6.3 STREE  | TADDRESS     | is   |
|   | CITY-ST-ZIP                                      |  |                                  | 6.4 CITY-5   | ST-ZIP       |  |

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 attachment with an address, with all other like empowered.

SIGNATURE: