PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 18, 1999 8:00 am Secretary of State 02-18-1999 90053 042 ***150.00

 Corporation 	MENT # P95000 Jams, Inc.	024730					1 100 100			18 H1H BIDI		111 20 11 1887
Principal Place	of Business	Mailing Addres	s		–	_						
1113 N FEDERA		10700 SW 88 ST	r						•			
ft lauderdali US	E FL 33394	STE 208 Miami Fl 33176						DO NOT W	RITE IN TH	IIS SPACE		
บจ		US US				3.	Date Incorp	rated or Qualife				
							03/28/199	3 5				
2. Principal Pla	ace of Business	2a. Mailing Add	ress				FEI Number		_			ied For
H		26					<u>65-06251</u>	07				Applicable
Suite, Apt. i	#, etc.	Suite, Apt.	#, etc.			5.	Certifcate of	Status Desired			roonad He Reg	iditional uired
22		27 City & State			=		Elastina Ca	npaign Financin				lay Be
City & State	•	28	•			15 .	Trust Fund (• -		ded to	
23	Country	Zip		Country		8.	This corpora	tion owes the cu	rrent year	Intangible		
24	25	29	30	<u> </u>			Personal Pr	operty Tax.		☐ Yes		No
	9. Name and Address of Curren	nt Registered Agent		-		10.	Name and	Address of Nev	Register	ed Agent		
MUC	KOWITZ, MARC			81	Name							
_	EDGEWATER CT			82	Street A	daress (P	O. Box Nun	ber is Not Acce	ptable)			
	AUDERDALE FL 33332			83								
• • • • • • • • • • • • • • • • • • • •	ADDENDATE I C GOOGE									· - -		
				84	City				F	85	Zip Co	ode
				1 3	,							
agent i ai	to the provisions of Sections 607.050 sgistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Flo of Florida. Such cha tions of, Saction 607	rida Statutes, nge was auth 7.0505, Florida	the above orized by the Statutes.	named c	orporation ation's bo	submits this ard of direct	statement for thors. I hereby acc		of changin pointment a	g its regi	egistered stered
SIGNATURE	Signature, typed or printed name of registered age	Illoris Oi, Spensii oo	.0000, 1 10101	the above orized by the Statutes.	named c	n nedw beniu	instating)	statement for thors. I hereby acc	DATE	AND DIRE	CTOR	S IN 12
agent I al	Signature, typed or printed name of registered age OFFICERS AN	nt and title if applicable.	.0000, 1 10101	13.	named c	guired when re	instating)	CHANGES TO C	DATE		CTOR	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN P MOSKOWITZ, MARC A	nt and title If applicable. ID DIRECTORS	(NOTE: Re	13. 1.1 TITLE 1.2 NAME	named corpor	VICE	DOITIONS	CHANGES TO CO DENT OWITZ	DATE	AND DIRE	CTOR	S IN 12
agent I all SIGNATURE 12.	Signature, typed or printed name of registered age OFFICERS AN P MOSKOWITZ, MARC A 10700 S.W. 88 ST., SUITE 208	nt and title If applicable. ID DIRECTORS	(NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS	VICE	DOITIONS	CHANGES TO C	DATE	AND DIRE	CTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS: CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P MOSKOWITZ, MARC A	at and title if applicable. ID DIRECTORS	(NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST	ADDRESS	VICE	DOITIONSA DE PRESI D MOSK EDGEW	CHANGES TO CO DENT OWITZ	DATE	AND DIRE	CTOR inge	S IN 12
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN P MOSKOWITZ, MARC A 10700 S.W. 88 ST., SUITE 208	at and title if applicable. ID DIRECTORS	(NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME	-named comporting comporting to the comporting to the comporting to the composition of th	VICE DAVI 2695	DOITIONSA DE PRESI D MOSK EDGEW	CHANGES TO CO DENT OWITZ	DATE	AND DIRE	CTOR inge	S IN 12 XX Addition
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