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 #

JCO, INC.

P95000032931 (4)

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business SUITE 316 1740 NW N RIVER DR MIAMI FL 33125 US 2. Principal Place of Business 3. Date Incorporated or Qualified 04/21/1995 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired Fee Required City & State City & State City & State 2. City & State City & State 3. Date Incorporated or Qualified 04/21/1995 4. FEI Number 5. Certificate of Status Desired Fee Required F												
Sulface of Business 26	Principal Place of Business Mailing Address							r indicati eig inini ajari salit agiti	BUIN OBNOC 1814U 1251		#####	
2. Principal Place of Business 2. Applied For 4. FEI Number 6. Certificate of Status Desired Fee Required 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees 7 Country 7 Country 7 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	SUITE 316 1740 NW N RIVER DR			SUITE 3000. 201 SOUTH BISCAYNE BLVD.				DO NOT WRITE IN THIS SPACE				
2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For Sulte, Apt. #, etc Sulte, Apt. #, etc Sulte, Apt. #, etc 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing Fee Required Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	US		US				3. D	ate Incorporated or Qualified			·	
21 26 65-0573020 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. 22 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing Foundation Added to Fees 28 7 Country 7 7 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No								04/21/1995				
Suite, Apt. #, etc. 27 City & State City & State Country Zip Country Reference Required Saltas Desired Fee Required Status Desired Fee Required Fee Required St.00 May Be Added to Fees Required Fee Required		Place of Business	2a. Mai	ling Address			4. F	I Number		Αp	plied For	
Suite, Apt. #, etc. 27 City & State City & State Country Zip Country Reference Required Saltas Desired Fee Required Status Desired Fee Required Fee Required St.00 May Be Added to Fees Required Fee Required	21		26					65-0573020		No	t Applicable	
City & State 28 Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	Suite, Apt.	. #, etc		e, Apt. #, etc.			5. C	ertificate of Status Desired				
28 Trust Fund Contribution Added to Fees Zip Country Zip Country 48. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes No	City & State			City & State			6. EI	6. Election Campaign Financing \$5.00 May Be				
Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	23						Tr					
		Country		Zip Country			8. Th	8. This corporation owes or has paid the current year Intangible				
Name and Address of Current Begistered Agent 10 Name and Address of New Begistered Agent	24	25				Personal Property Tax due June 30.			,] No		
the state of the s		9. Name and Address of Curre	nt Registered	d Agent			10. N	ame and Address of New Re	gistered Agent			
B & C CORPORATE SERVICES, INC. 81 Name	E	8 & C CORPORATE SERVICES.	INC.		81	Name						
201 SOUTH BISCAYNE BLVD. SUITE 3000 82 Street Address (P.O. Box Number is Not Acceptable)	201 SOUTH BISCAYNE BLVD.				82	Street	Address (P.O	(P.O. Box Number is Not Acceptable)				
MIAMI FL 33131					83		· · · · · · · · · · · · · · · · · · ·		 ;			
94 City P5 Zin Code					84	City	· <u>-</u> ····		85	Zip (Code	
						1			- FL	'		
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 Signature, typicition protect name of responsed agent and titled applicable (NOTE: Registered Agent signature required when reinstating) DATE	SIGNATURE	Signature, typical or entitled name of reservoire tar	rent and title diapol	k aber (NOII	F Registered Age	ant Signatur	required when rei	nstetina)	DATE			
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	12.					<u>~</u>			CERS AND DIRE	CTOR	S IN 12	
Language control of the control of t		P		DELETE	1.1 TITLE					hange	Addition	
NAME CRAIG, JAMES E. JR 1.2 NAME	NAME	CRAIG, JAMES E. JR			1.2 NAME							
STREET ADDRESS PO B OX 141525	STREET ADDRESS				1.3 STREET	ADDRESS						
CHY-ST-ZIP CORAL GABLES FL 1.4 CHY-ST-ZIP		1			1.4 CITY - S	T-ZIP						
TITLE \$ DELETE 2.11IILE Change Addition		8		DELETE			-		□ c	nange	Addition	
NAME CRAIG, GRAVEN W. 22 NAME	NAME	CRAIG, GRAVEN W.			2.2 NAME							
STREET ADDRESS RT 1 BOX 222 2.3 STREET ADDRESS					2.3 STREET	ADDRESS						
CITY-ST-ZIP EARLYSVILLE VA 2.4 CITY-ST-ZIP							1					
				DELETE					C	hange	Addition	
NAME 3.2 NAME	NAME				3.2 NAME			•				
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CITY-ST-ZIP 4.4 CITY-S1-ZIP					4.4 CITY - S	T-ZIP						
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NAME 5.2 NAME 70002529097 STREET ADDRESS -05/19/9801053037	1					ADDRESS		_0E/10/000100				
CITY-ST-ZIP)			
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NAME 6.2 NAME] `								-	1/2/	
STREET ADDRESS 6.3 STREET ADDRESS						ADDRESS					108/1	
CITY-S1-ZIP 6.4 CITY-S1-ZIP											1 ', '	

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.