SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

APPROVED AND FILED
1996 SEP -4 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000044235 (6)

1. Corporation Name
JEM UNLIMITED, INC.

Principal Place of Business
2263 N.E. 164TH STREET
NORTH MIAMI FL 33160

Mailing Address
2263 N.E. 164TH STREET
NORTH MIAMI FL 33160

3. Date Incorporated or Qualified: **06/08/1995**
3a. Date of Last Report:

2. Principal Place of Business
21
Suite, Apt #, etc.
22 1100 N Fla. Mango Rd
City & State
23 W. Palm Bch FL
Zip 24 33409
Country 25

2a. Mailing Address
26
Suite, Apt #, etc.
27 1100 N Fla. Mango Rd
City & State
28 W. Palm Bch FL.
Zip 29 33409
Country 30

4. FEI Number 65-05 88371 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CORPORATE ACCESS, INC.
1116 D THOMASVILLE ROAD
MOUNT VERNON SQUARE
TALLAHASSEE FL 32303

10. Name and Address of New Registered Agent
81 Name: Edward McDonald
82 Street Address (P.O. Box Number is Not Acceptable): 1870 NW 93rd Terrace
83
84 City: Plantation FL 85 Zip Code: 33322

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 McDonald
Signature typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent Signature required if filing online) — DATE

12. OFFICERS AND DIRECTORS

TITLE	President ☐ DELETE
NAME	Edward McDonald
STREET ADDRESS	1100 N. Fla Mango Rd #C
CITY-ST-ZIP	West Palm Bch. FL 33409
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	600001950736
2.3 STREET ADDRESS	-09/18/96--01077--008
2.4 CITY-ST-ZIP	****225.00 ****225.00
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Title

CR2E034 (3/96)