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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000045959 (0)

JOTA INVESTMENTS, INC.

Principal Place of Business

SIGNATURE:

2600 SOUGLAS SUITE 410-DOL CORAL GABLES	iglas centre	2600 SOUGLAS ROAD SUITE 410-DOUGLAS CEN CORAL GABLES FL 33134				3. Date Incorporated or Qualified 06/14/1995	3a, Date of Last 06/11/1996	•
2. Principal Pi	ace of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number		Applied For
21		26				NOT APPLICABLE		Vot Applicable
Suite, Apt :	#, etc	Suite, Apt #, etc.				5. Certificate of Status Desired Security Securi		
City & State	<i>y</i>	City & State				6. Election Campaign Financing	\$5.0	May Be
23		[28]				Trust Fund Contribution		d to Fees
— Zip	Country	Zip	├ ──	untry		8. This corporation has liability for it		s. 199.032,
24	[25]	29	30				Yes No	
	g. Name and Address of Curre	nt Registered Agent		81 N	Name	10. Name and Address of New Re	Jistered Agent	
	ICAN, ROSARIO P			" "	varne			
	DOUGLAS ROAD				82 Street Address (P.O. Box Number is Not Acceptable)			
	E 410-DOUGLAS CENTRE			83		***************************************		
COR	IAL GABLES FL 33134			03				
				84 C	City		FL 85 Zip	Code
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the obli	e of Florida. Such change was	authorize	ed by th	amed corp le corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of changing it the appointment a	its registered is registered
OKNOVICAL	Signature, typed or pilotod name of registered as	jent and tide it applicable [NO]	TE: Registere	ad Agent s	ignature requir	ed when reinstating)	DATE	
12.	OFFICERS AT	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TITLE	D	L DELETE	1.1 7	ITLE	S		Change	Addition
NAME	DUNCAN, ROSARIO P		1.2 N	NAME	D	UNCAN, ROSARIO P.	440	
STREET ADDRESS	2600 DOUGLAS ROAD SUITE	410 DOUGLAS CENTRE	1.3 S	STREET ADI		600 Douglas Rd. #		
CITY-S1-2IF	CORAL GABLES FL 33134	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	1.4 0	CTY-ST-Z	DP C	coral Gables, FL 3		
TITLE		☐ DELETE	2.1 1	ITLE	P	P/D	Change	Addition
NAME			2.2 N	IAME	L	IMASE, JULIAN		
STREET ADDRESS			2.3 \$	STREET ADI	DRESS C	:/o 2600 Douglas R bral Gables, FL 33	d #410	
CITY-ST-2IF				CITY-ST-Z	ZIP CC	oral Gables, FL 33		
TITLE		☐ DELETE	3.1 T	ITLE	İ		. Change	Addition
NAME			3.2 h	LAME				
\$TREET ADDRESS			3.3 \$	STREET ADI	Dress			
CITY-ST-ZIP				CITY - ST - Z	ZIP	***************************************		
TITLE		☐ DELETE	41T				Change	Addition
NAME			1	NAME				
STREET ADDRESS				STREET ADD				
City-St-ZiF		DELETE		CITY-ST-Z	3P		T 50	1.1102
TITLE		☐ DELETE	517				Change	Addition
NAME				NAME				
STREET ADDRESS				STREET ADD	1			
CITY-ST-7:P		T Bruss		CITY-ST-Z	<u> </u>		F1 oc	A 3 404*
TITLE		☐ DELETE	6.17				Change	Addition
NAME				NAME				
STREET ADDRESS			635	STREET ADO	DRESS			
CITY-ST-7IP				CITY-ST-Z				
14. Edo heret informatio Eam an of appears in	by certify that the information suppli ir indicated on this annual report or fficer or director of the corporation on h Block 12 or Block 13 if changed,	ed with this filing does not qual supplemental annual report is or trudice empore or or a suitachment with an ad	ity for the true and wered to Idress.	exemp accurate execute	ation stated te and that a this repor	I in Section 119.07(3)(i), Florida Statuter my signature shall have the same lega 1 as required by Chapter 607, Florida S	 I further certify that I effect as if made u tatutes; and that my 	at the inder oath; that / name