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 # 1. Corporation Name P95000062508 (3)

JMC EQUITY CORP.

Principa	Place	of	Busin	oss

Mailing Address

FILED May 13 1998 8:00am Secretary of State



1900 GLADES ROAD SUITE 400 BOCA RATON FL 33431 1900 GLADES ROAD SUITE 400 BOCA RATON FL 33431			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/14/1995				
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21 2300	GLADES ROAD	26 2300 GLAN	ES ROAD	65-0604691	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Clty & Stat		City & State 28 BOCA RAY		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24 334	Country 25	29 3343/ 3	Country	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible		
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ad Agent		
GR	REENFIELD, WILLIAM R		81 Name				
	00 GLADES RD NTE 400		Street Address (P.O. Box Number is Not Acceptable) 7300 GLAGES ROAG				
, BO	CA RATON FL 33431		83 5017	75 /AN 15			
			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code		
			Rock		L 3343/		
11. Pursuant office or r agent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	.02 and 607.1508, Flori da Statutes e of Florida. Such chan ge was a u gations of, Section <mark>607.0505,</mark> Flori	, the above-named co thorized by the corpor da Statules.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	 of changing its registered appointment as registered 		
SIGNATURE							
12.	Signature, typed or punted manic of registered as	gont and life if applicable (NOTE F ND DIRECTORS	Registered Agent signature req	ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D	DELETE	1,1 TITLE	ADDITIONATE HANGES TO OFFICE 13 2	Change Addition		
NAME	GREENFIELD, WILLIAM R		1.2 NAME				
STREET ADORESS		480 Z300 GLADES RO					
CITY-ST-ZIP	BOCA RATON FL 33431	SVITE 100E	1.4 CITY - ST - ZIP				
TITLE		DELETE	2.1 TITLE		Change Addition		
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP	and the second			
TITLE		DELETE	3.1 TITLE		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-S1-ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
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		DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS	!						
			6.3 STREE1 ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

Thereby 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 the exemption of the corporation or the receiver or the exemption of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in