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

P95000073830 (8) DOCUMENT #

FILED Feb 17 1998 8:00am Secretary of State

JUHN	A. JAMIESON, P.A.								
Principal Plac	ce of Business	Ma	ailing Address					80 111 5 1 18100 1	AT 1814 AT DAS LANGE
1212 S.E. 2ND AVENUE 1212 S.E. 2ND AVENUE									
FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315									
						DO NOT WRITE IN THIS SPACE			
Ī							3. Date Incorporated or Qualified		
A D C C C C C C C C C C		····					09/25/1995		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	F	Applied For
21 Suite Act	# ato	26	Suite, Apt. #, etc.				65-0610561		lot Applicable
Suite, Apt. #, etc.			7				5. Certificate of Status Desired		Additional
City & State			City & State						Required
23			28				6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	20	Zip	Co	untry			_	to Fees
24	25	29		30			This corporation owes or has paid the cur Personal Property Tax due June 30.		ntangible □ No
	9. Name and Address of Currer		ered Agent	[00]	Τ		10. Name and Address of New Registered		
CL	ARKSON, JUNE M				81	Name			
	40 HOLLYWOOD BLVD.				00	<u> </u>	(0.0.0)		
SUITE 201				82 Street Add			ss (P.O. Box Number is Not Acceptable)		
HOLLYWOOD FL 33020									
100011100011 30020			1						
					84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 60	7 1508, Florida Statu	les, the a	pove	e-named corpo		f changing	its registered
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.									
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SIGNATURE	Signature, typed or printed name of registered an-	a Land life r	fapilicable (NO	1£ Registera	d Age	nt signalure required	d when reinstating) DATE		
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	D		DELET e	1.1 T	TLE			Change	☐ Addition
NAME	JAMIESON, JOHN A			1.2 N	AME				[
STREET ADDRESS	1212 S.E. 2ND AVE.			1.3 \$	TREET.	ADDRESS			1
CITY-ST-ZIP	FT. LAUDERDALE FL 33315			1.4 C	ITY - S1	1-ZIP			j
TITLE			DELETE	2.1 3(Change	Addition
NAME				2.2 N	AME	ŀ			
STREET ADORESS				2.3 S	TREFT	ADDRESS	•		
CITY-ST-ZIP				2 4 0	HTY-S	T-ZIP			
TITLE			DELETE	3.1 TI				Change	Addition
NAME				3.2 N/	AME			-	1
STREET ADDRESS				3.3 \$1	IREET /	ADDRESS			
CITY-ST-ZIP					(TY-S				
TITLE			DELETE	4.1 1/				Change	Addition
NAME				4.2 N	AME				
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP					1Y-S1				
TITLE			☐ DELETE	5 1 T)				Change	Addition
NAME				5 2 N/	AME			-	
STREET ADDRESS				4		ADDRESS			
CITY-ST-ZIP				5.4 CI		•			
TITLE			DELETE	6.1 111				Change	Addition
NAME				6.2 NA					
STREET ADDRESS				•		ADDRESS			
CITY-ST-ZIP				6.4 CI		ì			
	sertify that the information supplied w	th this fib	un does not qualify to				ection 119 07(3)(i) Florida Statutes I further ce	rtifu that the	information

Thereby Certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicit entries that it is true and accurate and that my signature shall have the same legal effect as if made under oath; that I is man 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.