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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P95000081613 (8)

10M JA	AX, INC.							
Principal Place	e of Business	Mailing Address			 -	- I IODAIGODI ING BOLGI ONIH GOHN BOHN OGIN BONGK BONGK		
350 79TH AVENUE NORTH. UNIT 204 POST OFFIC			FICE BOX 20775					
ST. PETERSBURG FL 33702 ST. PETERSBURG FL 3374			742-0775					
						DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualified 10/24/1995		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-3341449	—	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired		Required
City & State	•	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	· · · · · · · · · · · · · · · · · · ·		,	Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the curr		
24	25 9. Name and Address of Curr	29 29 Anent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered A		ØNo
TUC				81	Name	10. Haille Bild Address of New Negistered A	Saur	
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD								
343 ALMERIA AVENUE CORAL GABLES FL 33134				82 Street Address (P.O. Box Number is Not Acceptable)				
CORNE CARDLES PL 33 134				63				· · ·
				1				
				64	City	FL	85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.0	502 and 607, 1508, Florida Statu	tes, the at	ove	-named corpo		L. L changing	its registered
office or re	egistered agent, or both, in the Sta in familiar with, and accept the obl	ite of Florida. Such change was ligations of, Section 607 0505. Fl	authorized Iorida Stati	d by	the corporatio	ration submits this statement for the purpose of in's board of directors. I hereby accept the appo	intment a	s registered
SIGNATURE			oriac Otati					
OIGHT OIL	Signature, typed or printed name of registered a		TE Repistered	Ager	nt signature required	<u> </u>		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		_
TITLE	PTD DELETE		1.1 1(1	1.1 TITLE		1	Change	■ Addition
NAME	AND DATE ALEMAN IN LIGHT LINE OF			1.2 NAME				
STREET ADDRESS		1.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	ST. PETERSBURG FL 33702 VSD DELETE			1.4 CITY-ST-ZIP			Observe	- Address
NAME	PHILLIPS, JACKIE	DILLETE				•	Change	Addition
STREET ADDRESS	350 79TH AVENUE NORTH,	LINIT 204	ŀ	2.2 NAME 2.3 STREET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33702							
TITLE	01. 1 E1ENODONO 1 E 00/02	DELETE	_	2.4 CITY-ST-ZIP 3.1 TITLE			Change	I Addition
NAME			3.2 NAME			•	onungo	L. Hoombii
STREET ADDRESS					ADDRESS	·		
CITY-ST-ZIP			3.4. CI					
TITLE		DELETE		.1 TITLE			Change	Addition
NAME			4. 2 NA	ME		·	-	
STREET ADDRESS			4.3 STF	REET A	ADDRESS			
CITY-ST-ZIP			4.4 CfT	Y-ST	- ZIP			
TITLE	_ :	DELETE	5.1 TIT	LE			Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 STF	REET A	ADDRESS			
CITY-ST-ZIP			5.4 C/T	Y-ST-	- ZIP			
TITLE			6.1 TITLE				Change	Addition
NAME			6.2 NA	ME	Ì			
STREET ADDRESS			6.3 STP	REET A	ADDRESS			
CITY-ST-ZIP			6.4 CIT			440.07(0)		
officer or d	on this annual report or supplemen	ital annual report is true and acci ceiver or trustee empowered to:	curate and execute th	that	l my signature.	ection 119.07(3)(i), Florida Statutes. I further cert shall have the same legal effect as if made und ed by Chapter 607, Florida Statutes; and that m	er oath th	atlam an I

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