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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000017269 (7)

JGB ENTERPRISES OF CORAL GABLES, INC.

Principal Place of Business Mailing Address							a naannaan tisa talita diinit daliti daliti daliti daliti daliti (dalit		110 1011 (401		
	AZAR AVENUE	•		446 ALCAZAR AVENUE							
CORAL GABLES FL 33134			CORAL GABLES FL 33134					DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified	<u>-</u>		
								02/23/1996			
2. Principal Place of Business			2a. Mailing Address					4. FEI Number	Α	pplied For	
21				26				65-0659116	N	ot Applicable	
Suite, 22	Suite, Apt. #, etc.			Suite, Apt. #, etc.						Additional	
City & State			City & State							equired	
23	State		<u>├</u>	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country	Zip		Country	,		8. This corporation owes or has paid the current y			
24		25	29	ļ	30			Personal Property Tax due June 30.		iangibie No	
	9, Name	and Address of Current	_ 					10. Name and Address of New Registered Agen			
	SLESNICK, D	ONALD D			81	Na	ame				
	10680 N.W. 2	5TH STREET #202			62	Str	reet Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33172											
					83						
					84	Čit	ty	, 85	Zin	Code	
44 5		70	1007.4/00				-	FL I	į i		
office	or registered ag	jent, o r b oth, in the State c	of Florida, Such (change was au	ulhorized by	/ the:	med corpo corporatio	ration submits this statement for the purpose of chann's board of directors. I hereby accept the appointm	ging il ent as	ts registered registered	
ageni	l. I am familiar w	ith, and accept the obligat	ions of, Section	607.0505, Flor	rida Statutes	3.		, , , , ,		- 5	
SIGNATU	RE. Slovebye byres	for printed name of registered agent	Land Idio if acul cable	(AICOTA)	Stagistared Aca			wherers instailing) DATE			
12.	olgitaldio, typica	OFFICERS AND		hacit	13.	mit sigr	паните годинов	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTOF	29 IN 12	
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CITY-ST-ZIP	CORAL	GABLES FL 33134	_		1.4 City - S	1 - Z(P					
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NAME					2.2 NAME						
STREET ADDR	ESS				2.3 STREFT	ADDRE	ESS				
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NAME					3.2 NAME						
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NAME					5.2 NAME				~-		
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CITY-ST-ZIP					5.4 CITY - ST	1 - 7IP]	
TITLE			Ľ	DELETE	6.1 TITLE			☐ cr	ange	Addition	
NAME					6.2 NAME						
STREET ADDRE	:88				6.3 STREET A	ADDRE	ss				
CITY-ST-ZIP					6.4 CITY+ S1						
indica officer	ted on this annu or director of th	al report or supplemental :	annual report is l /cr or trustee em	true and accur ipowered to ex	rate and tha	il mv	sionature :	action 119.07(3)(i), Florida Statutes. I further certify th shall have the same logal effoct as if made under oa ed by Chapter 607, Florida Statutes; and that my nar	the tha	ttam an I	