

FILED
Jun 24, 2003 8:00 am
Secretary of State

06-09-2003 90118 005 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000029240 1. Entity Name JMF INTERNATIONAL, INC.					
Principal Place of Business 8355 S PERIMETER RD SUITE 120 FORT LAUDERDALE, FL 33309		Mailing Address 1835 SOUTH PERIMETER TERRACE SUITE 120 FORT LAUDERDALE, FL 33309			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Fort Lauderdale, FL		City & State Fort Lauderdale, FL			
Zip 33309		Zip 33309			
4. FEI Number 85-0873541		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROSS, PATRICIA F 1835 SO PERIMETER ROAD FORT LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.)					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS ROSS, PATRICIA F 1835 S PERIMETER ROAD FORT LAUDERDALE, FL 33309				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
12. I hereby 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Patricia Ross</u> 6/20/03 954-438 3043 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2034 (10/02)