


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

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Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>P96000043877</i> 1. Corporation Name JMS DESIGN, INC			
Principal Place of Business 1670 N.W. 61st AVE MARGATE, FL. 33063		Mailing Address 1670 N.W. 61st AVE MARGATE, FL 33063	
(PER ARTICLES OF INCORPORATION)			
2. Principal Place of Business 21 25 SEABREEZE AVE. Suite, Apt. #, etc. 22 SUITE # 304 City & State 23 DELRAY BEACH, FL Zip 24 33483		2a. Mailing Address 26 25 SEABREEZE AVE. Suite, Apt. #, etc. 27 SUITE #304 City & State 28 DELRAY BEACH, FL Zip 29 33483	
25 PALM BEACH Country 30 PALM BEACH		3. Date Incorporated or Qualified 5-12-96	
9. Name and Address of Current Registered Agent MICHAEL E. SIPULA 1670 NW 61st AVE MARGATE FL 33063 (PER ARTICLES OF INCORPORATION)		3a. Date of Last Report N.A.	
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. SIGNATURE: MICHAEL E. SIPULA <i>Michael E. Sipula</i> 4-15-97 <small>(NOTE: Registered Agent signature required when reinstating.)</small>		4. FEI Number 65-0669046	
12. OFFICERS AND DIRECTORS		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
1.1 TITLE <input type="checkbox"/> DELETE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2.1 TITLE <input type="checkbox"/> DELETE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		8. Name and Address of New Registered Agent 81 Name MICHAEL E. SIPULA 82 Street Address (P.O. Box Number is Not Acceptable) 16106 75th AVE NORTH 83 84 City PALM BEACH GARDENS FL 85 Zip Code 33418	
3.1 TITLE <input type="checkbox"/> DELETE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		14. I do 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 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 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.	
4.1 TITLE <input type="checkbox"/> DELETE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		15. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: MICHAEL E. SIPULA <i>Michael E. Sipula</i> 4-15-97 (561) 266-9999 Date Daytime Phone #	
5.1 TITLE <input type="checkbox"/> DELETE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		16. Filing Information 800002154428 -04/25/97--01004--048 ***165.00	

CR2E034 (9/96)