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

Mailing Address

PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 18 1997 8:00am

Secretary of State

Change

Change

■ Addition

Addition

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # P96000048511 (5)

J'R INTERNATIONAL BUSINESS CORP

MO LINCOLN RD MALL 940 LINCOLN RD MALL SUITE 204 MIAMI BEACH FL 33139-2610 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0670268 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 ☐ Yes 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ZAMARIOLI, JURACY 81 Namo 940 LINCOLN RD MALL 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 204** 83 MIAMI BEACH FL 33139 84 City Zip Code 85 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE Addition Change TITLE 1.1 TITLE ZAMARIOLI, JURACY NAME 1.2 NAME 6995 NW 82ND AVE #34 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33166-2783 CITY-\$1-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.13(1) NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 THEF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY ST-ZIP 3.4. CITY - \$1 - ZIP DELETÉ Change Addition TITLE 4.1 TO LE NAME 4. 2 NAME **STREET ADDRESS** 4.3 \$1REET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

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 eath; that I am an officer or director of the corporation or the receiver or trustog 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 attachmost with an address

DELETE

DELETE