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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000049264 (0)

JM MARKETING GROUP, INC.

Principal Place of Business

Mailing Address

## FILED Feb 10 1997 8:00am Secretary of State



| 6478 BRAVA WAY<br>BOCA RATON FL 33431 |  | 6478 BRAVA WAY<br>BOCA RATON FL 33433 | 6478 BRAVA WAY<br>BOCA RATON FL 33433-8237 |  |   |  |   |
|---------------------------------------|--|---------------------------------------|--|--|---|--|---|
|                                       |  |                                       |  |  | 3. Date Incorporated or Qualified 06/10/1996  | 3a. Date of Las                          | t Report                                |
| 2. Principal Pl                       | ace of Business  | 2a. Mailing Address                   |  |  | 4. FEI Number   |  | Applied For                             |
| 21                                    |  | 26 1672 W.                            | 26 1672 W. HILLSBORD BLUD                  |  | 1 65-0682833  |  | Not Applicable                          |
| Suite, Apt.                           | #, etc.  | Suite, Apt. #, etc.                   |  |  | 5. Certificate of Status Desired  | \$8.75 Additional Fee Regulred           |   |
| City & State                          | 9  | City & State                          |  |  | 6. Election Campaign Financing  |  | 00 May Be                               |
| <b>23</b> Zip                         | Country  | 28 DEERFIE                            | CD BE                                      | ACA, FL                                | Trust Fund Contribution   | ☐ Add                                    | d to Fees                               |
| 24                                    | <del>-</del>   |                                       | 30 30                                      | ROWARD                                 | This corporation has liability for Florida Statutes                                   | intangible tax unde<br>] Yes <b>⊠</b> No | r s. 199.032,                           |
| [24]                                  | 25]<br>9. Name and Address of Curre  | 29 30774                              | 30, 1,70                                   | 100011-22                              | 10 Name and Address of New Re   |  |   |
| VI E                                  | IN, JEFFREY G  |                                       |  | 81 Name                                | 10, 1101110 2110 11001000 01 11011 110  | grototoo regont                          |   |
|                                       | ON MILITARY TRAIL STE 270  |                                       |  |  |   |  |   |
| B00                                   |  |                                       |  | Iress (P.O. Box Number is Not Acceptat | ole)  |  |   |
|                                       |  |                                       |  | 83                                     |   |  |   |
|                                       |  |                                       | }  | 84 City                                |   | FL 85 Z                                  | ip Code                                 |
| office or re                          | to the provisions of Sections 607.00<br>egistered agent, or both, in the Sta<br>m familiar with, and accept the obli | te of Florida. Such change was        | s authorized                               | by the corpora                         | poration submits this statement for the partion's board of directors. I hereby accept | ourpose of changing the appointment      | g its registered<br>as registered       |
| SIGNATURE                             | Signature, typed or printed name of registered a   |                                       | kayo ka Dala Ja                            |  |   | DATE                                     |   |
|                                       | <del></del>  | ND DIRECTORS                          | 13.  | Agent signature requ                   | irud when reinstating)  |  | ODC IN 12                               |
| 12.                                   | D  | DELETE                                | 1.1 111                                    | 1.                                     | ADDITIONS/CHANGES TO OFFIC  | Chang                                    |   |
| NAME                                  | MEYER, JEFFREY S   | <b>2</b>                              | 1.2 NA                                     |  |   |  | ,                                       |
| STREET ADDRESS                        | 6478 BRAVA WAY   |                                       |  | REE1 ADDRESS                           |   |  |   |
|                                       | BOCA RATON FL 33433  |                                       | 1  |  |   |  |   |
| CITY-ST-ZIP<br>TITLE                  | BOOK TOTT TE GOTGO   | DELETE                                | 2.1 111                                    | Y-\$1-ZiP                              |   | Chang                                    | e Addilion                              |
| NAME                                  |  |                                       | 2.2 NA                                     |  |   |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| STREET ADDRESS                        |  |                                       | 1  | REFT ADDRESS                           |   |  |   |
| -                                     |  |                                       |  |  |   |  |   |
| CITY-ST-ZIP<br>TITLE                  |  | DELETE                                | 3.1 TH                                     | 1Y-S1-7IP                              |   | Chang                                    | e Addition                              |
| NAME                                  |  | the beccit                            | 3.2 NA                                     |  |   | بالمارة في                               | , c , c , c , c , c , c , c , c , c , c |
| STREET ADDRESS                        |  |                                       |  | REET ADDRESS                           |   |  |   |
| CITY-ST-ZIP                           |  |                                       |  |  |   |  |   |
| TITLE                                 |  | DELETE                                | 4.1 Til                                    | 1Y-\$1-2IP                             |   | Chang                                    | e Addition                              |
| NAME                                  |  |                                       | 4.2 N                                      | •                                      |   |  | ,- 🗀 /                                  |
| STREET ADDRESS                        |  |                                       |  | REET ADDRESS                           |   |  |   |
|                                       |  |                                       |  | Y-ST-ZIP                               |   |  |   |
| CITY-ST-ZIP<br>TITLE                  |  | DELETE                                | 5.1 TII                                    |  |   | Chang                                    | e Addition                              |
| NAME                                  |  | بالمهموم ليبيا                        | 5.2 NA                                     |  |   |  | ,                                       |
| STREET ADDRESS                        |  |                                       |  | REEL ADDRESS                           |   |  |   |
|                                       |  |                                       |  |  |   |  |   |
| CITY-ST-ZIP<br>TITLE                  |  | DECETE                                | 5.4 CI                                     | Y-SI-ZIP                               |   | Chan                                     | ge Addition                             |
| NAME                                  |  | FT DECEME                             |  |  |   | O1:01:1                                  | - L radición                            |
|                                       |  |                                       | 6.2 NA                                     |  |   |  |   |
| STREET ADDRESS                        |  |                                       |  | REET ADDRESS                           |   |  |   |
| CITY-ST-ZIP                           |  |                                       | 6.4 Ct                                     | Y-S1-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 13 if changed, or on an attachment with an address.

2/2/27