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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000076038 1. Corporation Name

JIMRO ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90140 026 ***150.00



7951 SW 40TH MIAMI FL 33155		7951 SW 40TH ST., STE. 208 MIAMI FL 33155		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 09/12/1996
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21 97/	7 500 /97	26 97/7 SW	147 =	65-0699697 Not Applicable
Suite, Apt. 1	#,.etc	Suite, Apt_#, etc		5. Certifcate of Status Desired See Required
City & State		20 7.7.1.1	H	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip 3 3	196 [25] Country VS	^{2ip} 33/96 30	Country / 5	8. This corporation owes the current year Intangible Personal Property Tax.
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
			81 Name	MANIA ATANA
	NA, MARIA L		82 Street	Address (P.O. Box Number is Not Acceptable)
	SW 40TH ST., STE. 208		OLI OLI OLI	97/7 SW 147CT
MIAN	/II FL 33155		83	
				as 75 Code
			84 City	M/Am/ FL 85 Zip Code 33/94
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				equired when reinstating) DATE
	Signature, typed or printed name of registered agen		ered Agent signature r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	_	1 TITLE	~ 1 . ~ 100
NAME	ARANA, MARIA L	li di	2 NAME	97/7 SW 147 CT
STREET ADDRESS	7951 SW 40TH ST., STE. 208		3 STREET ADDRESS	9717 SW 147 CT
CITY-ST-ZIP	MIAMI FL 33155		4 CITY-ST-ZIP	MIAMILE 33176 Change Addition
TITLE	DVST		1 TITLE	S/D Addition
NAME	arana, jaime a	2	2 NAME	JAINE A. ARANA
STREET ADDRESS	7951 SW 40TH ST., STE. 208	2	3 STREET ADDRESS	9212 KI 147 CT
CITY-ST-ZIP	MIAMI FL 33155	2	. 4 CITY-ST-ZIP	7/1/50/11/01
TITLE		☐ DELETE 3	1 TITLE	MIAMI FL 33196 Change Addition
NAME		3	.2 NAME	V0/2
STREET ADDRESS		3	3 STREET ADDRESS	17 G717 SW 197 CT
		3	.4. CITY-ST-ZIP	JAMEL 11- MIAMI 66 33/96
CITY-ST-ZIP TITLE			.1 TITLE	☐ Change
		_	. 2 NAME	TP Change Maddinon
NAME			.3 STREET ADDRESS	ROCCIO ARANA ATIT SW 147 + CT MIAMI EC
STREET ADDRESS				9717 500 147 110 110000 2515
CITY-ST-ZIP			4 CITY-ST-ZIP	Change Addition
TITLE			.1 TITLE .2 NAME	
NAME				
STREET ADDRESS			.3 STREET ADDRESS	
CITY-ST-ZIP			4 CITY-ST-ZIP	
TITLE			.1 TITLE	☐ Change ☐ Addition
NAME		6	.2 NAME	
STREET ADDRESS		6	.3 STREET ADORESS	
		/ / l	A CITY OF 7ID	

14. I hereby certify that the information supplied with this flind 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 of 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, with all other like empowered.

SIGNATURE: