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

**PROFIT** CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000082054 (3)

JAG OF SOUTH FLORIDA, INC.

FILED Jun 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4631 NORTHWEST 31ST AVENUE 4831 NORTHWEST 31ST AVENUE FORT LAUDEROLE FL 33309 FORT LAUDERDLE FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3405384 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MCGLOTHIN, DENNIS J 2920 N.E. 18TH STREET 82 POMPANO BEACH FL 33062 83 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corperation 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 toard of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered. SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE BARONE, TONI A NAME 1.2 NAME **2920 N.E. 18TH STREET** STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **GR**INER, JUDITH A NAME 2.2 NAME **29**20 N.E. 18TH STREET STREET ADDRESS 2.3 STREET ADDRESS **POMPANO BEACH FL 33062** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE 70000257784 NAME 6.2 NAME -07/01/38--01016--031 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00 CITY-ST-ZIP

14. 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 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 trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, prop an attactyment with an address.