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 # P96000086330 1. Corporation Name

JAMBAM ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1700 WEST INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32114	1700 WEST INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32114

FILED Mar 05, 1999 8:00 am Secretary of State

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1700 WEST INT	ernational speedway blvd	1700	WEST INTERNATIONA	L SPEEDV	SPEEDWAY BLVD							
DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114								DO NOT WRITE IN THIS SPACE				
							-	3 Date Inco	rporated or Qual			
								10/18/1	•			
2. Principal P	ace of Business	2a. N	Mailing Address	_				4. FEI Numb			T A	pplied For
21 26								59-3407	75 4 6	ė	N	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.							<u>, D</u>	\$8.75	Additional
22								5. Certificate	of Status Desire	d 🛮	Fee R	tequired
City & Stat	e		City & State					6. Election C	ampaign Financ	ing 🖂	\$5.00	Мау.Ве
23		28						Trust Fund	d Contribution		Added	to Fees
Zip	Country	Z	tip		Country			8. This corporation owes the current year Intangible				
24	25	29		30	<u> </u>			Personal Property Tax. Yes No				
	9. Name and Address of Curre	nt Registe	red Agent		04	.		10. Name an	d Address of Ne	ew Register	ed Agent	
000	DED MADY O FOO				81	Name	,					
	PER, MARK O ESQ.			Ì	82	Street	eet Address (P.O. Box Number is Not Acceptable)					
	EAST ROBINSON STREET											
	E 865				83							
UHL	ANDO FL 32301			Ì	84	City					. 85 Zip	Code
										_	L 33 2.15	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida.	Such change was a	uthorized	by 1	the corp	corpora coration's	tion submits to board of dire	nis statement for ctors. I hereby a	ccept the ap	pointment as re	egistered
SIGNATURE												\
	Signature, typed or printed name of registered ag			_	Agen	t signature	required wh	en reinstating)	O SOLIANIO E O TO	DATE	AND DIDEOT	ODC IN 12
12.	OFFICERS A	ND DIREC	DELETE	13.			T		S/CHANGES TO	OFFICERS	Change	Addition
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NAME	MILER, BRENDA	CDCCDWA	V DIMO			ADDRESS	Ala	ON NI	AA.	11.0		
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CITY-ST-ZIP TITLE			☐ DELETE	4 1 TIT			1				☐ Change	☐ Addition
NAME				4,2 NA	ME							
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CITY-ST-ZIP				4.4 CIT								1
TITLE			☐ DELETE	5.1 TIT			1				☐ Change	Addition
NAME				5.2 NA	ME							
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CITY-ST-ZIP				5.4 CIT	Y- S1	r-ZIP					-	
TITLE			☐ DELETE	6.1 TIT	LE		1				Change	☐ Addition
NAME				6.2 NA	ME							}
STREET ADDRESS				6.3 STI	6.3 STREET ADDRESS							
				_								

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 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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP