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

CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 02 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000092546 (6) DOCUMENT #
1. Corporation Name

J. ARMSMOORE, INC. Principal Place of Business Mailing Address 2231 NORTHEAST 56 PLACE 2231 NORTHEAST 56 PLACE FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/12/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0724040 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 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 Name AMERILAWYER CHARTERED 343 ALMERIA AVENUE 82 CORAL GABLES FL 33134 83 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 (NO16: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 11 TITLE TITLE HEATH, JUANITA NAME 1.2 NAME 2231 NORTHEAST 56 PLACE STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33308 1.4 CITY-ST-ZIP CITY-ST-ZIP DELET**E** Change Addition TITLE 2.1 TITLE HEATH, JAMES H 2.2 NAME NAME 2231 NORTHEAST 56 PLACE STREET ADDRESS 2.3 STREET ADDRESS FORT LAUDERDALE FL 33308 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 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 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

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. 1410+1

6.4 CITY - ST - ZIP

2/20100