## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT CESTATI

Sandra B. Mortha

Secretary of State

DIVISION OF CORPORA DNS

1997

Oringinal Place of Pusings

DOCUMENT # P96000102852 (6)

J M F DESIGNS INCORPORATED

FILED
May 14 1997 8:00am
Secretary of State



4/30/27

941 927-8817

rancipal riace	o Or Dusinoss	Maling Address						
8201 SOUTH TA BARASOTA FL 3	MIAMI TRAIL. UNIT 24 04238	8201 SOUTH TAMIAMI TRAI SARASOTA FL 34238-2949	IL. UNIT :	1				
					3. Date Incorporated or Qualit	ied 3a. D	ate of Last R	leport
2. Principal Pi	ace of Business	2a. Mailing Address		T	4. FEI Number	aniu/	Ar	pplied For
21		26		]	65-065	3747	No.	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<b>—</b>		5. Certificate of Status Desired	, D		Additional equired
City & State	9	City & State			Election Campaign Financi     Trust Fund Contribution	ng 🔲		May Be to Fees
Zip	Country	Zip	Co.	ir iy	<ol> <li>This corporation has liabilit</li> </ol>			s. 199.032 <sub>1</sub>
4	25	29	30	,	Florida Statutes		∐ No	
	9. Name and Address of Curre	nt Registered Agent	·	II Ikat siiti	10. Name and Address of Ne	w Hegistered	Agent	
	ND, JAMES MICHAEL			81   Nam	·0			
8201	24		82 Stree	Street Address (P.O. Box Number is Not Acceptable)				
SARA	ISOTA FL 34238					·-····································		
				83				
				84 City		FL	<b>-</b>	Code
office or r	to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig	o of Florida. Such change was a	authorize	d by the o	ed corporation submits this statement for orporation's board of directors. I hereby	the purpose o accept the app	of changing i pointment as	its registered s registered
SIGNATURE	Signature, typed or printed harve of registered by		t Registere	a Agent signal	ure required when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	D	☐ DETETE	1.1 T				Change	] Addition
NAME	FRIEND, JAMES MICHAEL		1.2 N				f.	
STREET ADDRESS	3519 PLANTATION DRIVE		1.3 \$	TREEL ADDRES	S			
CITY-ST-ZIP	SARASOTA FL 34231			IIY-SI-7IP			Change	Addition
TITLE		☐ DELETE	2.1 T				Change	□] X00IIIOII
NAME			2.2 N					
STREET ADDRESS				TRELL ADDRES	S			
CITY-ST-ZIP		DELFTE	2. 4 C	DITY-ST-ZIP			Change	Addition
TITLE								
NAME			3.2 N					
STREET ADDRESS			1	TREET ADDRES	5			
CITY-ST-ZIP TITLE		DELETE	34.1 411	ITLE			Change	Addition
		F 0111.1F	4.21					
NAME STREET ADDRESS				arien Areet Addres	25			
				ny SI-ZIP	~			
CITY-ST-ZIP TITLE		DETETE	517				Change	Addition
NAME			521					
STREET ADDRESS	1			TREET ADDRES	ss [			
CITY-ST-ZIP				917 - S1 - Z(P	1			
TITLE		DELETE	611				☐ Change	Addition
NAME			621	IAME				
STREET ADDRESS			635	TREET ADDRES	ss			
CITY-ST-7IP			640	iTY - ST - ZIP				
44 Ldo boro	by certify that the information suppli	ed with this filing does not qual	iby for the	exempto	n stated in Section 119.07(3)(i), Florida S	tatutes I furth	er certify tha	at the
informatic I am an c appears	on indicated on this annual report or officer or director of the corporation of in Block 12 or Block 13 changed,	supplemental annual report is or the receiver or trustee empoy or on an attal himent with an ad	true and wered to dress.	accurate a execute th	and that my signature shall have the sam is report as required by Chapter 607, Flo	e iegai ellecti prida Statutes;	and that my	name : name