

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).


APPROVED  
AND  
FILED

98 DEC 15 AM 10:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0075961

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000041931 (1)  
 1. Corporation Name  
 JORUM GROUP, INC.

Principal Place of Business Mailing Address  
 6014 LE LAC ROAD 6014 LE LAC ROAD  
 BOCA RATON FL 33496 BOCA RATON FL 33496



REINSTATEMENT 98  
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip 28 Zip Country 29 Country  
 24 25 29 30

3. Date Incorporated or Qualified  
 05/12/1997  
 4. FEI Number Applied For  
 65-0774866 Not Applicable  
 5. Certificate of Status Desired \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
 REVOREDO, ROSA REBECA V  
 6014 LE LAC ROAD  
 BOCA RATON FL 33496

10. Name and Address of New Registered Agent  
 81 Name ROSA REBECA VASQUEZ  
 82 Street Address (P.O. Box Number is Not Acceptable) 6014 LE LAC ROAD  
 83  
 84 City BOCA RATON FL 85 Zip Code 33496

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 of 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 *Rosa R. Vasquez* DATE Dec-9-98  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	REVOREDO, ROSA REBECA V	
STREET ADDRESS	6014 LE LAC ROAD	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P VP S T D	Change	Addition
1.2 NAME	ROSA REBECA VASQUEZ		
1.3 STREET ADDRESS	6014 LE LAC ROAD		
1.4 CITY-ST-ZIP	BOCA RATON, FL 33496		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS	000002721020--2		
3.4 CITY-ST-ZIP	-12/23/98-01056-017		
	***750.00 ***750.00		
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 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.

SIGNATURE: *Rosa R. Vasquez* NATURAL REQUIRED 25 NOV 1998

CR2E034 (5/98)