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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

\$andra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000046043 (0)

JORSA, INC.

FILED Jul 17 1998 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address			Sidia Diili adin aidea mir idar
601 BRICKELL KEY DRIVE SUITE 805 601 BRICKELL KEY DRIVE SUITE 805			SUITE 805		
MIAMI FL 33131 MIAMI FL 33131				DO NOT WRITE IN THIS SPACE	
Ì	î Z'			3. Date Incorporated or Qualified	IS OF ACE
}	te			05/23/1997	
2. Principal P	Place of Business	2a, Mailing Address		4, FEI Number	Applied For
21	Tage of Elbanicas	26		65-0768442	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Dosired	Fee Required
City & Stat	0	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	_ ` ` 1
24	25		30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Register	30 Agent
	LEN & GALEGO	_	TET VAZOUEZ & HESS		
601 BRICKELL KEY DRIVE SUITE 805				LET VAZQUEZ & HESS iress (P.O. Box Number is Not Acceptable)	
MIA	AMÎ FL 33131		501 B	rickell Key Drive, s	te_4_07
				, Florida 33131	
			84 City		85 Zip Code
	\rightarrow 0 of d	and CO7 1500 Florida Cladula	Miam:	paration submits this statement for the number	33131
office or r	to the provisions of Sections 007.0902 registered agen), or both, in the State of	of Florida. Such change was at	s, the above-hamed corpora	poration submits this statement for the purposition's board of directors. I hereby accept the s	appointment as registered
agent. La	fin fa miliar with and accept the object	tions of, Section 607.0505, Flor	^{rida Statutes.} In ac		
SIGNATURE	Signature typed or printed half of registered agen	it and title if applicable. (NOTE:	Registered Agent signature requ	4-6-98	F
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	President	DELETE	1.1 TITLE		Change Addition
NAME	Saul Jampolsky		1.2 NAME		
STREET ADDRESS	501 Brickell Key	Drive Ste 407	1.3 STREET ADDRESS		
CITY-ST-ZIP	Mimai, Florida 33	2131	1.4 CITY-ST-7IP		
TITLE	•	DELETE	21 THLE		Change Addition
NAME	Secretary		2.2 NAME		
STREET ADDRESS	Saul Jampolsky 501 Brickell Key	Drives Cto 407	2.3 STREET ADDRESS		
CITY-\$1-ZIP		221.21	2. 4 CITY-ST-ZIP	• • • • • • • • • • • • • • • • • • • •	
TITLE	- Miami, Florida #3	DELETE DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		İ
STREET ADDRESS	1		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		01-1-1
TITLE	<u> </u>	☐ DELETE	4.1 TITLE		Change Addition
NAME	1		4. 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T DOLLAR	4 4 CHY-ST-ZIP		Change DAddilion
TITLE		DELETE	5.1 TITLE		The same of the sa
NAME			5.2 NAME		Yn 1/1-4
STREET ADDRESS			5.3 STREET ADDRESS	•	
CITY-ST-ZIP		T NOICTE	5.4 CITY-ST-ZIP		Change Addition
TITLE		DELETE	6.1 TITLE	1000025943	
NAME)		62 NAME	-07/21/9801090	046
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	भारत
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0.07000 Florid Code 1 Code	

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 an ary machinent with an address.

SIGNATURE:

4-28-91 305-374-8302