## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P9700064950 (3) JAGCOMP INC. Principal Place of Business Mailing Address 7119 S.W. 128TH COURT 7119 S.W. 128TH COURT MIAMI FL 33183 MIAMI FL 33183 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/25/1997 2. Principal Place of Business 2a. Mailing Address Applied For 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 Žω Country 8. This corporation owes or has paid the current year Intangible 25 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent GONZALEZ, JOSE A 7119 S.W. 128TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) MAMI FL 33183 83 Zip Code octions 607-0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered by the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered scept the obligations of, Spetion 607.0505, Florida Statutes. 11. Pursuant to the provisions office or registered agont agent. I am familiar with a SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. <del>-13</del>. DELETE Change Addition TITLE 11 TITLE GONZALEZ, JOSE A NAME 1.2 NAME 7119 S.W. 128TH COURT STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL 33183 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE GONZALEZ, DALILA 2.2 NAME 7119 S.W. 128TH COURT STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33183** CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 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 plus recovered 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 man analysis an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

THILE

NAME

Change