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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P97000077242 (0)

JOGO, INC.

**FILED** Jun 30 1998 8:00 am Secretary of State



			<del></del>	<u>-</u> }	
Principal Place of Business Mailing Address					
21131 NE 4T		21131 NE 4TH CT			
MIAMI FL 33179 MIAMI FL 33179				DO NOT WRITE IN THIS SPACE	
	4	•		3. Date Incorporated or Qualified	
				09/08/1997	
2. Principal P	lace of Business	2a. Mailing Address	1	4 FEI Number	Applied For
21 0-01	S. Onwereity Dru	12-26 8018 WAY	versity Dr.	65-0780590	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 HC13	<b>6</b>	27 #C138		C. Celtinicate of Status Dearles	Fee Required
City & State		City & State	<b>^</b>	6. Election Campaign Financing	\$5.00 May Be
<del></del>	ation, FL	28 / IQN107700	<u> </u>	Trust Fund Contribution	Added to Fees
Zip a a a	Country	Zip 2002	Country	8. This corporation owes or has paid the cu	
24 383			OSA	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
Of Norm					Agent
SULUMON, JACK					
2113 NE 4TH CT			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MIAM(FL 33179			83		
			00		
,	* : :		84 City	FI	85 Zip Code
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					
Signature, typad or printed name of registered agent and title if applicable (NOTE: Registered Agent signature require					
12.	<del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	RUTSKY, JACK		1.2 NAME		
STREET ADDRESS	21131 NE 4TH CT		. 1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33179	T pri rye	1.4 CITY-ST-ZIP		Ohanna Addition
TITLE	D	DELETE	2.1 TITLE		Change
NAME	RUTSKY, JULIUS		2.2 NAME		
STREET ADDRESS	<b>⊉1131 NE 4TH CT</b>		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33179	PELSTS	2 4 CITY-ST-ZIP		Change Addition
TITLE	DIFAM NAMED	DELETE	3.1 TITLE		Change Addition
NAME	RUTSKY, MAUREEN		3.2 NAME		
STREET ADDRESS	21131 NE 4TH CT		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33179	DELFTE	3.4 CITY-ST-ZIP		Change Addition
TITLE	D DOCIVAL	□ מבננים	4.1 TITLE		C orange L Addition
NAME	RUTSKY, ROSLYN		4. 2 NAME		
STREET ADDRESS	21131 NE 4TH CT		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33179	☐ DELETÉ	4.4 CITY-ST-ZIP		Change Addition
TITLE		□ orccie	5.1 TITLE		
NAME	:		5.2 NAME	<b>20000025773</b> -07/01/38010460	14 L
STREET ADDRESS			5.3 STREET ADDRESS	***158.Q	9 '
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Andrew Terror Control	Change Addition
TITLE	•	ר"ז סנונו <b>ר</b>	6.1 TITLE 6.2 NAME	Parisa	TO CHANGE TO MAGNITURE
NAME				X 6/2.	
STREET ADDRESS	:		6.3 STREET ADDRESS	•	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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.

4-28-90

954-476-9223