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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P97000080853 (9)

JADERUN ENTERPRISES, II	1 14 14 14 14 14 14 14 14 14 14 14 14 14			
Principal Place of Business	Mailing Address			
12360 ROCKLEDGE CIRCLE BOCA RATON FL 33428	12380 ROCKLEDGE CIRCLE BOCA RATON FL 33428	DO NOT WRITE IN THIS		
		3. Date incorporated or Qualified 09/17/1997		
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number US 0787961		
Suite, Apt. #, etc.	Suite, Apt #, etc.	5. Certificate of Status Desired		
City & State	City & State	6, Election Campaign Financing		

## **FILED** Apr 29 1998 8:00am Secretary of State



SPACE Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Yes 30 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 NAUDIC, JOEY 12380 ROCKLEDGE CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** 83 64 City 65 Zip Code

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office or re	to the provisions of Sections 607.0502 ( registered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was a	uthorized by the corpora	poration submits this statement tion's board of directors. I here	for the purpose of changing is by accept the appointment as	ts registered registered
SIGNATURE						
	Signature, typed or printed name of registered agent a		Registered Agent signature requ	ired when reinstaling)	DATE	
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES 1	O OFFICERS AND DIRECTOR	
TITLE	CEO	DELETE	1.1 TITLE		Change	Addition Addition
NAME	NAUDIC, JOEY		1.2 NAME			
STREET ADDRESS	12380 ROCKLEDGE CIR.		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		1 4 CITY - ST - ZIP			
TITLE	PS	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	NAUDIC, JARLA		2.2 NAME			
STREET ADDRESS	12380 ROCKLEDGE CIR.		2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		2 4 CITY - ST - ZIP			
TITLE	CFO	DELETE	3 1 TITLE		Change	Addition
NAME	SCHWARTZ, ELLIOT		3.2 NAME			
STREET ADDRESS	10829 LA SALINAS CIR.		3.3 STREET ADDRESS			]
CITY-ST-ZIP	BOCA RATON FL 33428		3.4. CITY-ST-ZIP			
TITLE	CHRM	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME	SCHWARTZ, ROBIN		4. 2 NAME			1
STREET ADDRESS	10829 LA SALINAS CIR.		4.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			i
STREET ADDRESS			5.3 STREET ADDRESS			Į
CITY-ST-ZIP			5.4 CiTY - ST - ZiP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME (			6.2 NAME			Į
STREET ADDRESS			6.3 STREET ADDRESS			1
CITY - ST - ZIP			6.4 CITY - ST - ZIP			

14. Thereby 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 angular 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 proportion or the receiver of trusted empawered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 if changed, or on an attachment with an address.