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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000081890 (0) JCA REALTY, INC.

FILED Jan 27 1998 8:00am Secretary of State



| | | | | | | | | | | ŀ | | | | |
|--|--|--------|--------------|--------------|----------|---------------------|--------------------|-----------------------------|---------------|-------------------------------|--|---|---------------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | | | | | t inneitent lin føste indel døste Malei døsti kaldt (i |)4 0 1 1100 1 1011 0 | 10115 0016 4005 | |
| 3101 N FEDERAL HWY 6TH FLOOR FORT LAUDERDALE FL 33306 STORY LAUDERDALE FL 33306 STORY LAUDERDALE FL 33306 STORY LAUDERDALE FL 33306 | | | | | | | 33306 | 306 | | | DO NOT WRITE IN THIS | S SPACE | | |
| | | | | | | | | | | | 3. Date Incorporated or Qualified 09/22/1997 | | , | |
| 2. Principal Place of Business | | | | | | 2a. Mailing Address | | | | | . FEI Number | | Applied For | |
| 21 | | | | | | 26 | | | | | 65-0788517 | | Not Applicable | |
| Suite, Apt. #, etc. | | | | | | Suite, Apt. #, etc. | | | | | . Certificate of Status Desired | | Additional Required | |
| City & Stat | le | | | City & State | | | | | 6. | . Election Campaign Financing | \$5.0 | 0 May Be | | |
| 23 | | | | 2 | 28 | | | | _ | | Trust Fund Contribution | | d to Fees | |
| Zip | Country | | | | | | | Country | | 8. | . This corporation owes or has paid the ci | urrent year I | Intangible | |
| 24 | 25 | | | | 9 | | | | , <u>_</u> | | Personal Property Tax due June 30. | Yes | □ No | |
| 9, Name and Address of Current Registered Agent | | | | | | | | | · | 10 | 10. Name and Address of New Registered Agent | | | |
| CORPORATE & CRIMINAL RESEARCH SERVICES, INC | | | | | | | | | Name | | | | | |
| 103 N MERIDIAN STREET LOWER LEVEL | | | | | | | | 82 Street Address (P.O. Bo. | | | P.O. Box Number is Not Acceptable) | | | |
| TALLAHASSEE FL 32301 | | | | | | | | 83 | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | 84 | | | FL | _ [| o 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 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 a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | | | | | its registered is registered | |
| SIGNATURE | | | · | • | • | | | | | | | | | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re | | | | | | | | | int signature | requirea what | | | | |
| 12. | OFFICERS AND DI | | | | | | | | 13. | | ADDITIONS/CHANGES TO OFFICERS AN | | | |
| TITLE | D | 20 | IOCEDII C | | | ☐ DELETE | 1,1 TI | ILE | | ļ | | ☐ Change | Addition | |
| NAME | AMATURO, JOSEPH C 3101 N FEDERAL HWY, 6TH FLOOR | | | | | | | 1.2 NAME | | | | | | |
| STREET ADDRESS | FORT LAUDERDALE FL 33306 | | | | | | | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | roni L | יטטו | HUALE PL 333 | 00 | DELETE | | | 1.4 City-St-ZiP | | | | | | |
| TITLE | | | | | | ☐ DELETE | 2 1 Tf | | | | esident | Change | X Addition | |
| NAME | | | | | | | | | | | shemi, A. Hamid | _ | ĺ | |
| STREET ADDRESS | | | | | | | | | | | 1 N. Federal Highway, | | 600 | |
| CITY-ST-ZIP TITLE | - | | | | | | | 2. 4 CITY-ST-ZIP E | | | t Lauderdale, FL 333 | | | |
| i | | | | | | D DECEIE | | | | | | ∐ Change | Addition | |
| NAME STREET ADDRESS | | | | | | | 3.2 NA | | | | | | | |
| | | | | | | | ADDRESS | | | | | | | |
| CITY-ST-ZIP TITLE | | | | | | ☐ DELETE | 3.4, Ci 4.1 1t1 | | i - ZIP | | | Change | Addition | |
| NAME | | | | | | □ весете | 4. 2 N | | | | | □ Glange | L Addition | |
| STREET ADDRESS | | | | | | | | | +DDDCCC | | | | | |
| CITY-ST-ZIP | | | | | | | 1 | | ADDRESS | | | | | |
| TITLE | | | | | | DELETE | 4.4 C() 5.1 T() | | 1-ZIP | | | Change | Addition | |
| NAME | | | | | | | 5.2 NA | | - 1 | | | | C) Addition | |
| STREET ADDRESS | | | | | | | | | *DD0E00 | | | | | |
| CITY-ST-ZIP | | | | | | | | | ADDRESS | | | | | |
| TITLE | | | | | | DELETE | 5 4 CI | | 1- ZIP | | | Change | Addition | |
| NAME | | | | | | Cal Deterie | 6.2 NA | | | | | □ ∩ mande | L. AUGIDOII | |
| STREET ADDRESS | | | | | | ~ | | | ADDRESS | | | | 1 | |
| CITY-ST-ZIP | | | | | | 1 | | | 1 | | | | | |
| 14 hereby or | artifu that the | Linfor | | نجاف جافانية | a dilina | 1 | 6.4 CIT | 1-51 | - ZIP | 11.0 | | | | |

ed with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in that 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 occurrence of trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplem officer or director of the corporation of the Block 12 or Block 13 if changed by or an

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