FILED Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90135 019 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000083055**1. Corporation Name

JAY EMANUEL & ASSOCIATES INC.

| Principal Place of Business Mailing Address | | | | | | | [][[0] [][][][][][][][][][][][][][][][][|
|---|--|-----------------------------------|-----------------|----------------------|--|-----------------------------|--|
| 13200 SW 128TH STREET 13200 SW 128TH STREET | | | | | | | |
| SUITE F-2 SUITE F-2 | | | | | | | |
| MIAMI FL 33186 MIAMI FL 33186 | | | | | DO NOT WRITE IN T | HIS SPACE | |
| US US | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | 09/24/1997 | | .0-15 |
| Principal Place of Business 2a. Mailing Address | | | | 4. FEI Number | | olied For | |
| <u></u> | | 26 | | | 65-0782408 | \$8.75 A | Applicable |
| | | Suite, Apt. #, etc. | | | 5. Certifcate of Status Desired | Fee Red | |
| 27 | | | | | - Starting Committee Financing | | · |
| ⊢ ···, ·· · · · · · · · · · · · · · · · | | ⊢ | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 i Added to | - 1 |
| 7in | Zip Country Zip | | Country | | This corporation owes the current year | | 7. 555 |
| 24 | 25 | ——— r | 30 | | Personal Property Tax. | | □No |
| 241 | 9 Name and Address of Curren | <u> </u> | - T | | 10. Name and Address of New Register | ed Agent | |
| | J. Hallo and Hallo | | 81 | Name | | , | |
| EMA | NUEL, JAY | | - | <u> </u> | (D.O. Day Number in Not Accontable) | - | |
| 13200 SW 128TH ST | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| SUITE F-2 | | | 83 | - | | | |
| MAIM | AI FL 33186 | | | | | | |
| | | | 84 | City | F | 85 Zîp C | ode |
| 11 Pursuant | to the provisions of Sections 607.050 | 2 and 607.1508. Florida Statute | s, the above | L e-named con | poration submits this statement for the purpose | of changing its | registered |
| office or n | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was au | ithorized by | the corporati | ion's board of directors. I hereby accept the ap | pointment as reg | istered |
| _ | m familiar with, and accept the obliga | tions of, Section 607.0303, Flori | iga Statutes | • | | | |
| SIGNATURE | Signature, typed or printed name of registered ager | t and title if applicable (NOTE: | Registered Ager | nt signature require | red when reinstating) DATE | | |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR | |
| TITLE | P | ☐ DELETE | 1.1 TITLE | | • | Change | Addition |
| NAME EMANUEL, JAY | | | 1.2 NAME | | | | 1 |
| STREET ADDRESS 13200 SW 128TH STREET, SUITE F-2 | | | 1.3 STREET | (ADDRESS | | | , |
| CITY-ST-ZIP | MIAMI FL 33186 | | 1.4 CITY-S | T-ZIP | | | |
| TITLE | | | 2.1 TITLE | | | Change | ☐ Addition |
| NAME | | | 2.2 NAME | | | | 1 |
| STREET ADDRESS 13200 SW 128TH STREET, SUITE F-2 | | | 2.3 STREET | (ADDRESS | r | - - | |
| CITY-ST-ZIP | MIAMI FL 33186 | | 2.4 CITY-S | T-ZIP | | | |
| TITLE | | ☐ DELETE | 3 1 TITLE | | | Change | Addition |
| NAME | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | 3 3 STREET | (ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY-S | iT-ZIP | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 4. 2 NAME | | | | į |
| STREET ADDRESS | | | 4.3 STREET | TADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-S | T-ZIP | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Change | ☐ Addition |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-S | r-ZIP | | Chance | Addition |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | | | 6.2 NAME | | | | ĺ |
| STREET ADDRESS | | | 6.3 STREET | TADDRESS | | | l |

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 suppliemental 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, with all other like empowered.

SIGNATURE: