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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

P97000089127 (9)

JAGMANIA, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Disc				
•	e of Business	Mailing Address	111111111111111111111111111111111111111	. reausan ria sour inais mein attin abiti baidi 1816 1816 1181 1181 1181
1236 3RD ST	T., 8. .LE BEACH FL 32250	1236 3RD ST., S.	U E1 900E0	
		JACKSONVILLE BEAC	n FL 32230	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				10/15/1997
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21]		26		59-347/003 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		27 City # Crate		Fee Required
3	C	City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution Added to Fees
4	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curre		100	10. Name and Address of New Registered Agent
KA	WASZKA, DAVID M		81 Name	
	36 3RD ST., S.		66 0000	(0.0.0)
	CKSONVILLE BEACH FL 32250		82 Street Add	dress (P.O. Box Number is Not Acceptable)
			83	
			A	PAN Secretaria
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Stat	ules, the above-named cor	rnoration submits this statement for the purpose of changing its registered
onice or n	egistered agent, or both, in the State m familiar with, and accept the oblig	3 of Florida. Such change was	s authorized by the corpora	ation's board of directors. I hereby accept the appointment as registered
		,	ioned elatatee.	
_				
SIGNATURE	Signature, typed or printed name of registered ag-	ont and title if applicable (No	OTE: Registered Agent signature requ	ulred when reinstating) DATE
SIGNATURE	OFFICERS AN	IO DIRECTORS	DTE: Registered Agent signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	OFFICERS AN			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	OFFICERS AN D Kanaszka, David M	IO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	OFFICERS AN D KANASZKA, DAVID M \$101 BARTOLOME RD.	D DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D Kanaszka, David M	ID DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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