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 # P97000100066 (4)

JESSICA MASSA, INC.

FILED Apr 08 1998 8:00am Secretary of State



					AI
Principal Place of Busi	ness	Mailing Address), by (1811, 8810), 68111 80110 81118 6111 1081
6536 COLUNS AVE. S		6538 COLLINS AVE., SUI	TE 401		
MIAMI BEACH FL 3314	1	MIAMI BEACH FL 33141		DO NOT WRITE	E IN THIS SPACE
				3. Date Incorporated or Qualified	
				11/21/1997	
2. Principal Place of B	usiness	2a. Mailing Address	int Divid	4. FEI Number	Applied For
21 4538 (1)11	112 MAC	26 12000 BISCAN	INC DIVUI	1 05-0816260	Not Applicable
2 3 3 1 1 6 40 1	l	Suite, Apt. #, etc. 27 SUITE 720	}	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 MIUMI	ach Fl	28 N. M. M.	F1	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
~~ Zip221/11	Country	- ^{Zp} 200	Country	8. This corporation owes or has pa	
24 37141 0 No	me and Address of Current	29 33101 Begintered Apopt	30 FIDI 1010	Personal Property Tax due June	
	IAIS, MICHAEL	Hedisteled Mailt	81 Name	10. Name and Address of New Re	gistered Agent
	DAYNE BLVD., SUITE 220				
NORTH MIAMI FL 33181				ress (P.O. Box Number is Not Acceptal	ole)
11011111 1711	Will 1 E 00101		63		
			84 City		
					FL 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstation). DATE					
12.	Ped or printed name of registered agent OFFICERS AND		Registered Agent signature requirements 13.	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE
THE PYPS	dern	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME JASSI	ca Massa de	DCDVA	1.2 NAME		
STREET ADDRESS 145.35	ca Massa de .	BUITE 401	1.3 STREET ADDRESS		
CITY-ST-ZIP MIAY	ni Beach, Fl 33	141	1.4 CITY - ST - ZIP		
TITLE	•	☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		[] DELETE	2 4 CITY-ST-ZIP		
TITLE NAME		☐ DELETE	3.1 TITLE		Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			I		
TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	(☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CRY-ST-ZIP			4.4 CiTY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-ZIP		AT 1 100	6.4 CITY - ST - ZIP		
THE Engreny certify that	and intermation cumplied with	i thic tiling dooc ool gualifu fo	r the exemption stated in	Contino 110 07/3/ii) Elevide Statutes I	A continue and a state of the s

r neredy certify that the information supplied with this hiring does not quarify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplied with 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 officers.