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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000100782 1. Corporation Name

J.S.A. INTERNATIONAL SALES, INC.

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90024 025 ***150.00



							i i i i I i i i i	
Principal Place of Business		Mailing Address				() Marie () Ma		
4397 NORTH PINE ISLAND ROAD		4397 NORTH PINE ISLAND ROAD						
SUNRISE FL 33351		SUNRISE FL 33351			DO MOT WORTE IN THE CRACE			
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 11/25/1997	Į	
O Deinsing Di	(and of Business	2a. Mailing Address				4. FEI Number Applied	For	
2. Principal Place of Business		F -				12-2440630 Not App		
21 State And Wester		Suite, Apt. #, etc.				\$8.75 Addition		
Suite, Apt. #, etc.		27 Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Require		
City & State		City & State			فتحريس يسوين	6. Election Campaign Financing 55.00 May	Re	
23	,	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip Country				This corporation owes the current year Intangiple		
24		29 30			Personal Property Tax.	·		
	9. Name and Address of Current					10. Name and Address of New Registered Agent		
				81	Name	,		
MATATOF, JACOB		82 Str		Stroot Addr	ress (P.O. Box Number is Not Acceptable)			
4220 N.W. 100TH AVENUE				BZ Street Ad		ess (P.O. Box Number is Not Acceptable)		
COR	AL SPRINGS FL 33065			83				
					-	85 Zip Code		
				84	City	FL s z p coas	1	
								
11, Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the	above	-named corp	poration submits this statement for the purpose of changing its regis	tered	
office or r	agistered agent or both in the State of	Florida 'Such change was as	IITOOTIZE	יעם מפ	the corporation	oration submits this statement for the purpose of changing its regis on's board of directors. I hereby accept the appointment as register	tered ed	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida 'Such change was as	IITOOTIZE	יעם מפ	the corporation	o <u>ration submits,this, statement for the purpose of changing its regis</u> on's board of directors. I hereby accept the appointment as register	tered ed	
office or readent. I a	agistered agent or both in the State of	Florida. Such change was a ons of, Section 607.0505, Flori	itnoriza rida Sta	etutes.	tne corporation	nd when reinstating) DATE		
office or readent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was a solution of, Section 607.0505, Florida in title if applicable. (NOTE DIRECTORS	itnoriza rida Sta	ed Dy atutes. ed Agen	tne corporation	nd when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	112	
office or nagent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation of signature, typed or printed name of registered agent. OFFICERS AND	Florida. Such change was an ins of, Section 607.0505, Floring and title if applicable. (NOTE	Registere	ed Dy atutes. ed Agen	tne corporation	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II		
office or reagent. I all SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligation of projection o	Florida, Such change was a solution of, Section 607.0505, Florida in title if applicable. (NOTE DIRECTORS	Registere	ed Dy stutes.	tne corporation	nd when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	112	
office or ragent. I all SIGNATURE 12. TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of signature, typed or printed name of registered agent. OFFICERS AND	Florida, Such change was a solution of, Section 607.0505, Florida in title if applicable. (NOTE DIRECTORS	Registere 13	ed Agen	tne corporation	nd when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	112	
office or ragent. I all SIGNATURE 12. TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of projection o	Florida, Such change was a nois of, Section 607.0505, Florida of the framework of the frame	Registere 1.3	ed Agen	TADDRESS	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12 Addition	
office or ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was a solution of, Section 607.0505, Florida in title if applicable. (NOTE DIRECTORS	### 121	ed by stutes. ed Agen TITLE NAME	TADDRESS	on's board of directors. Thereby accept the appointment as register ind when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	112	
office or reagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was a nois of, Section 607.0505, Florida of the framework of the frame	### Registers 13 1.1 1.2 1.3 1.4 2.1	ad Agen TITLE NAME STREET CITY-SI	TADDRESS	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12 Addition	
office or ragent. I ail SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was a nois of, Section 607.0505, Florida of the framework of the frame	### Registere 13 1.1" 1.24 1.33 1.44 2.1" 2.21 2.	and Agen TITLE NAME STREET CITY-ST TITLE NAME	TADDRESS	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12 Addition	
office or ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was a nois of, Section 607.0505, Florida of the framework of the frame	### Registere 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.3	and Agen TITLE NAME STREET CITY-ST TITLE NAME	ot signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
office or ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was a nois of, Section 607.0505, Florida of the framework of the frame	### Comparison of Comparison o	ad Agen Add Agen TITLE NAME STREET TITLE NAME STREET	ot signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	Addition Addition	
office or ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Florings of, Section 607.0505, Florings of the Florida of	### Register 13	ad Agen TITLE NAME STREET TITLE NAME STREET CITY-SI CITY-SI CITY-S	ot signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
office or ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Florings of, Section 607.0505, Florings of the Florida of	### Registere ### Registere ### 13 1.1'	and Agen and Agen TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME NAME	ot signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
office or ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Florings of, Section 607.0505, Florings of the Florida of	### Registere 13	and Agen and Agen TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME NAME	T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
office or ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Florings of, Section 607.0505, Florings of the Florida of	### Registers 13	and Agen Title NAME STREET TITLE NAME STREET TITLE NAME STREET CITY-ST TITLE NAME STREET STREET STREET STREET NAME STREET NAME	T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
Office of ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Floridand title if applicable. (NOTE DIRECTORS DELETE DELETE	India Star Registers 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1	and Agen TITLE NAME STREET CITY-SI TITLE CITY-SI TITLE NAME STREET NAME CITY-S TITLE NAME CITY-S	T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
office of ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Floridand title if applicable. (NOTE DIRECTORS DELETE DELETE	India Starting Starti	and Agen TITLE NAME STREET TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME NAME NAME NAME NAME NAME	T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change	Addition Addition	
Office of ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ons of, Section 607.0505, Florings of, Section 607.0505, Florings of Parkets of Pa	India Starting Starti	and Agen TITLE NAME STREET TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME NAME NAME NAME NAME NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change	Addition Addition Addition	
Office or ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida, Such change was an ins of, Section 607.0505, Floridand title if applicable. (NOTE DIRECTORS DELETE DELETE	Registere 13 1.1 1.2 1.3 1.4 4.2 2.3 3.3 3.4 4.1 4.2 4.3 4.4 4.5 5.1	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change	Addition Addition	
Office of ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ons of, Section 607.0505, Florings of, Section 607.0505, Florings of Parkets of Pa	Registere 13 1.1 1.2 1.3 1.4 4.2 2.3 3.3 3.4 4.1 4.2 4.3 4.4 4.5 5.1	ad Agen TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change	Addition Addition Addition	
office of ragent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ons of, Section 607.0505, Florings of, Section 607.0505, Florings of Parkets of Pa	India Star Registers 13	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change	Addition Addition Addition	
Office of ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ons of, Section 607.0505, Florings of, Section 607.0505, Florings of Parkets of Pa	Registere 13 1.1 1.2 1.3 1.4 4.2 2.3 3.4 4.1 4.2 4.3 4.4 5.1 1.5 2.2 5.3 5.4	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change Change Change	Addition Addition Addition	
Office of ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ons of, Section 607.0505, Florings of, Section 607.0505, Florings of Parkets of Pa	India Start Registere 13	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change Change Change	Addition Addition Addition	
Office of ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ins of, Section 607.0505, Florida of Section 6	India Start Registere 13	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change Change Change	Addition Addition Addition	
Office of ragent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of registered agent. OFFICERS AND P MATATOF, JACOB 4420 NW 100 AVE	Florida. Such change was an ins of, Section 607.0505, Florida of Section 6	India Starting Starti	and Agen and	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II Change Change Change Change	Addition Addition Addition	

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 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 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.