## 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 # P9800001170

1. Corporation Name

JMR & COMPANY, INC.

Principal Place of Business

Mailing Address

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90133 023 \*\*\*150.00



22341 COLLINGTON DRIVE 22341 COLLINGTON DRIVE BOCA RATON FL 33428 BOCA RATON FL 33428		•	DO NOT WRITE IN TH	IIS SPACE		
			3. Date Incorporated or Qualifed 01/02/1998			
2. Principal Place of Business	2a. Mailing Address 26 PO BOX 97	0624	4. FEI Number 65-0803871	Applied For Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	, .	5. Certificate of Status Desired	** \$8.75 Additional ** Fee Required		
City & State	City & State  28 Boca Rate	on, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip 33497 Cou	ntry	This corporation owes the current year     Personal Property Tax.	Intangible ☑Yes ☐No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
SALZMAN, LESLIE 22341 COLLINGTON DRIVE BOCA RATON FL 33428		<ul><li>81 Name</li><li>82 Street Addres</li><li>83</li></ul>	ss (P.O. Box Number is Not Acceptable)			
11 Pursuant to the provisions of Sections 607.0502	and 607 1508 Florida Statutes, the a	84 City		85 Zip Code		

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 title if applicable	NOTE: Da	egistered Agent signature n	equired when reinstating) DATE				
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE		☐ DELETE	1.1 TITLE	President	☐ Change	☐ Addition		
NAME	· · ·		1.2 NAME >	Leslie Salzman 22341 Collington Dr	•			
STREET ADDRESS			1.3 STREET ADDRESS	22341 Collington Dr				
CITY-ST-ZIP			1.4 CITY-ST-ZIP	Boca Raton, FL 33	428			
TITLE		☐ DELETE	2.1 TITLE	UP.	☐ Change	☐ Addition		
NAME			2.2 NAME	Dick Salaman,				
STREET ADDRESS	en <u>a</u> en		2.3 STREET ADDRESS	22341 collington Pr	- ·			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	Boca Ratun FL 33	3428			
TITLE		☐ DELETE	3.1 TITLE	•	☐ Change	☐ Addition		
NAME		i	3.2 NAME					
STREET ADDRESS	· .	,	3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition		
NAME	· · · · · · · · · · · · · · · · · · ·		4. 2 NAME					
STREET ADDRESS	• •		4.3 STREET ADDRESS					
CITY-ST-ZIP		_	4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE	,	Change	Addition 1		
NAME			5.2 NAME	, ·				
STREET ADDRESS	<del></del>		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-ST-ZIP			6.4 CITY-ST-ZIP					
	artify that the information symplicid with this filling doe	e not qualify for th	a everation states	t in Section 119 07/3\/i\ Florida Statutes I further cer	tify that the in	formation		

indicated on this annual report or supplied with this fitting does not qualify for the exemption stated in Section 1.18.07(3)(f), Fronda Statutes. If further certify that the moment 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.

SIGNATURE: