PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000013829

1. Corporation Name

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90109 043 ***158.00

	JSE LOANS CORPORATION							
Principal Place		Mailing Address						
9000 W FLAGLER STREET 9000 W FLAGLER STREET								
#114 #114 #114 MIAMI FL 33174 MIAMI FL 33174			DO NOT WRI	TE IN THIS	SPACE		ı	
			3. Date Incorporated or Qualifed				1	
				02/11/1998				
2. Principal Pl	face of Business	2a. Mailing Address	~ 4 / ()	4. FEI Number			plied For	
L= :	NORTH KENDALL DRIVE	26 10661 NOK	ern Kendall D	P 6508/2222			t Applicable	i
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	×	\$8.75 A		
22 // 2_		27 // City & State		6. Election Campaign Financing		\$5.00		
City & State 23 MIGMI FLA.		281 HIGHI FLA.		Trust Fund Contribution		Added		i
Zip Zip	Country	Zio	Country	a This corporation owes the curr	ent year inta	ngible		
21 3317			30 - USA-	Personal Property Tax.	، ويوسعه -	☑ Yes ·	No "1-	-
24, 90, 7	9. Name and Address of Current I	Registered Agent		10. Name and Address of New F	Registered A	gent		i
			81 Name					i
AMELLIO, JOSEPH M		82 Street Add	iress (P.O. Box Number is Not Accepte	ible)			i	
, , , , ,	SW 99 STREET							i
MIAN	AI FL 33156		83					ļ
Í			84 City			85 Zip (Code	i
l				the statement for the	FL.	transing its	recistered	i
l office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Fionga, Such change was au	ILLICUZBO DĂ NIA COLEONAR	ion's board of directors. I hereby accep	the appoin	tment as re	gistered	
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SIGNATURE	Signature, typed or printed name of registered agent a	nd hite if applicable. (NOTE:	Registered Agent signature respire		DATE FICERS ANI	DIRECTO		í
SIGNATURE	OFFICERS AND	nd little of applicable. (NOTE:	Registered Agent algusture require	ed when redust#8**9) ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12	100,000
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14. Hereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3Xi), 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 eath; 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: