## 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 # P98000031826 1. Corporation Name

WE JAM JE CORP

Principal Place of Business	Mailing Address
1801 S. FEDERAL HIGHWAY	1801 S. FEDERAL HIGHWAY
SUITE 300	SUITÉ 300
DELDAY DEACH EL 20402	DELDAY DEACH EL 22403

## **FILED** Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90179 013 \*\*\*150.00

VVEUZIVN	e conf.							
Principal Place	e of Business	Mailing Address				1691/2681 318 18181 78/11 88111 88/11 88/11 88/11		2 HB10 0111 (081
1801 S. FEDERA	AL HIGHWAY	1801 S. FEDERAL	HIGHWAY					
SUITE 300	, L , 11011777.	SUITE 300						
DELRAY BEACH FL 33483 DELRAY BEACH FL 33483			33483			DO NOT WRITE IN TH	IS SPACE	
						3. Date incorporated or Qualifed		i
: 						04/07/1998	<del></del>	
2. Principal P	face of Business	2a. Mailing Addre	ss			4. FEI Number	<del></del>	pplied For
21		26				65-0834401		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, (	etc.			5. Certificate of Status Desired	•	Additional -
22		27					Fee H	tequired
City & Stat	e	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Co	untry	•	8. This corporation owes the current year	_	<b>&gt;</b>
24	25	29	30			Personal Property Tax.	∐ Yes	<b>M</b> No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registere	d Agent	
				81	Name	,		ļ
	iel, albert			82	Street Ado	dress (P.O. Box Number is Not Acceptable)		
1801	I S. FEDERAL HIGHWAY			-	Datotria			
SUIT	TE 300			83				
DELI	RAY BEACH FL 33483			_		<u>,</u>	ne Zin	Code
				84	City	F	L 85 Zip	Code .
11 Purenant	to the provisions of Sections 607.05	502 and 607.1508. Florid	a Statutes, the	above	e-named cor	poration submits this statement for the purpose	of changing if	s registered
office or r	registered agent, or both, in the State	e of Florida. Such chang	e was authorize	ed by	the corporat	tion's board of directors. I hereby accept the app	ointment as r	egistered
agent.la	rm familiar with, and accept the oblig	gations of, Section 607.0	505, Florida Sta	itutes	i.			J
SIGNATURE		- I di di	(NOTE: Pagistors	d Anne	at eigensture requir	red when reinstating) OATE		
42	Signature, typed or printed name of registered ag	ND DIRECTORS	(NOTE: Registere		it signature requi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12.	D	DE		TITLE		7.00111011010101010101010101010101010101	☐ Change	
			l l	NAME	ļ			. [
NAME	ANGEL, ALBERT	CLUTE GOO			T ADDRESS			
STREET ADDRESS		SUITE SUU			ſ			}
CITY-ST-ZIP	DELRAY BEACH FL 33483			CITY-S	T-ZiP		Change	Addition
TITLE		□ DE		TITLE			Çılarığa	
NAME			2.21	VAME				1
STREET ADDRESS			2.3	STREE	TADDRESS			
CITY-ST-ZIP				CITY-S	ST-ZIP	The state of the s		
TITLE			LETE 3.1	TITLE				· ☐ Addition i
NAME				HILL	<b>I</b>		Change	
STREET ADDRESS			3.2	VAME			Change	
CITY-ST-ZIP				VAME	T ADDRESS	·	Change	
TITLE			: 3.3	NAME STREE	}	·	<u> </u>	
11700		☐ DE	3.3	VAME	}	·	Change	
NAME		□ DE	3.3 3.4 LETE 4.1	STREET CITY-S	}			
NAME CTREST + DDDESS		□ DE	3.3 3.4. ELETE 4.1 4.2	NAME STREET CITY-S TITLE NAME	ST-ZIP			
STREET ADDRESS		□ DE	3.3 3.4. LETE 4.1 4.2 4.3	NAME STREET CITY-S TITLE NAME STREE	ST-ZIP			
STREET ADDRESS CITY-ST-ZIP			3.3 3.4. LETE 4.1 4.2 4.3	STREET CITY-S TITLE NAME STREET CITY-S	ST-ZIP		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE			3.3 3.4. 3.4. 4.1 4.2 4.3 4.4 LETE 5.1	STREET CITY-S TITLE NAME STREET CITY-S TITLE	ST-ZIP			Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME			3.3 3.4. 3.4. 4.1 4.2 4.3 4.4 (LETE 5.1 5.2	NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME	ST-ZIP T ADDRESS		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.3 3.4. 4.1 4.2 4.3 4.4 (LETE 5.1 5.2	NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE	T ADDRESS T ZIP T ADDRESS		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		□ DE	3.3 3.4. 3.4. 4.2 4.3 4.4 6LETE 5.1 5.2 5.3 5.4	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S CITY-S	T ADDRESS T ZIP T ADDRESS		☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.3 3.4 4.1 4.2 4.3 4.4 4.1 4.2 5.1 5.2 5.3 5.4 4.4 4.1 4.2 6.1	NAME STREE CITY-S TITLE NAME CITY-S TITLE NAME STREE CITY-S TITLE TITLE TITLE	T ADDRESS T ZIP T ADDRESS		☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DE	3.3 3.4 4.1 4.2 4.3 4.4 4.EETE 5.1 5.2 5.3 5.4 ELETE 6.1 6.2	NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME CITY-S TITLE NAME STREE CITY-S TITLE NAME	T ADDRESS IT-ZIP  T ADDRESS IT-ZIP  T ADDRESS IT-ZIP		☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		□ DE	3.3 3.4 4.1 4.2 4.3 4.4 4.EETE 5.1 5.2 5.3 5.4 ELETE 6.1 6.2	NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME CITY-S TITLE NAME STREE CITY-S TITLE NAME	T ADDRESS T ZIP T ADDRESS		☐ Change	Addition  Addition

14. 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 suppliemental 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 employed of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or an attachment with 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 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 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 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 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 supplied with the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certification indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Flor