


AMOUNT DUE ON OR BEFORE 8/15/99 \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750)

FILED  
Aug 09, 1999 8:00 am  
Secretary of State

08-09-1999 90005 015 \*\*\*550.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P98000094378</b> 1. Corporation Name <b>JAC TECHNOLOGIES CORPORATION.</b>					
Principal Place of Business <b>6500 OLDE MOAT WAY</b> <b>DAVIE FL 33331</b>			Mailing Address <b>6500 OLDE MOAT WAY</b> <b>DAVIE FL 33331</b>		
<b>2. Principal Place of Business</b> 21 Suite, Apt. #, etc. 23 City & State 24 Zip Country		<b>2a. Mailing Address</b> 26 Suite, Apt. #, etc. 27 City & State 29 Zip Country		<b>3. Date Incorporated or Qualified</b> <b>11/06/1998</b> <b>4. FEI Number</b> <b>65-0875475</b> Applied For Not Applicable <b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required <b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> \$5.00 May Be Added to Fees <b>8. This corporation owes the current year Intangible Personal Property.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>9. Name and Address of Current Registered Agent</b> <b>CARDONA, ANTONIO J</b> <b>6500 OLDE MOAT WAY</b> <b>DAVIE FL 33331</b>			<b>10. Name and Address of New Registered Agent</b> 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code		
<b>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.</b> SIGNATURE: <i>Antonio J Cardona</i> (NOTE: Registered Agent signature required when reinstating) DATE: <b>8/2/99</b>					
<b>12. OFFICERS AND DIRECTORS</b>			<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>		
TITLE: <b>D</b> <input type="checkbox"/> DELETE NAME: <b>CARDONA, ANTONIO J</b> STREET ADDRESS: <b>6500 OLDE MOAT WAY</b> CITY-ST-ZIP: <b>DAVIE FL 33331</b>			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-ST-ZIP:			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-ST-ZIP:			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-ST-ZIP:			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-ST-ZIP:			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-ST-ZIP:			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
<b>14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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.</b> SIGNATURE: <i>Antonio J Cardona</i> DATE: <b>8/2/99</b> Daytime Phone #					



65-0875475

DO NOT WRITE IN THIS SPACE

CR2E034 (5/99)