## 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 # S08171 1. Corporation Name

JODAL, INC.

## FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90090 002 \*\*\*150.00

Principal Place of Business   Mailing Address									
SUITE 1010 MAMN FL 33195 MANN	Principal Place of Business Mailing Address						*	· 415() (80)	
MAMI FL 3319S MAME FL 3319S  MAME FL 3319S  MAME FL 3319S  MAME FL 3319S  DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  10/23/19930 Outlied  10/23/19930 Outlied  10/23/19930 Place of Business  Sulle, Apt. #, etc.  22	_ · · · · · · · · · · · · · · · · · · ·						ļ		
2. Principal Place of Business   2a. Mailing Address   2b. Maili	Latina Latina						DO NOT WORTE IN THE OPACE		
10/23/1990	MIAMI FL 33136 MIAMI FL 33136								
Sulfa, Apt. 4, etc.		· · · · · · · · · · · · · · · · · · ·	<del></del>				10/23/1990		
Suite, Apt. #, etc.    Suite, Apt. #, etc.	<del> </del>						TFF***		
City & State   City & Country   City & Country   City & Country   City & City   City & City									
27				pt. #, etc.			I S Continate at Status Desired I I	Conficete of Status Desired 1 1	
23	City & State City & S			& State			6. Election Campaign Financing \$5.00 Ma	у Ве	
25	23								
STEIN BARRY A   9100 S DADELAND BLVD   58   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Number is Not Acceptable)   51   Street Address (P.O. Box Num		<del>_</del> '	Zip	Zip Country					
STEIN BARRY A. 9100 S DADELAND BLVD SUITE 1010 MIAMI FL 33156  82 Street Address (P.O. Box Number is Not Acceptable)  83   Marrier 1010 MIAMI FL 33156  84 City FL 85 Zip Code  11. Pursuant For registered agent, or both, in the State of Florida. Such change was authorized by the corregistered agent, or both, in the State of Florida. Such change was authorized by the corregistered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE SIGNATURE STREET ADDRESS OTY-ST-ZP  TITLE  DP	24	25 29 30		30			Personal Property Tax.		
STEIN BARRY A. 9100 S DADELAND BLVD SUITE 1010 MIAMI FL 33156  82	<b> -</b>	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent		
9100 S DADELAND BLVD SUITE 1010 MIAMI FL 33156  84 City FL 85 Zip Code  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, 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 dependence of profession of 0.7505. Florida Statutes.  SIGNATURE    12	STE	N RARRY A			81	Name			
SUITE 1010 MIAMI FL 33156  88  64 City FL 85 Zip Code  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 and machine the objection 607.0505, Florida Statutes.  SIGNATURE  Speniers Appeal or printed name of registered agent and title if subcleable.  POFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DP STEIN, BARRY A  9100 S.OADELAND BLV#1010  MIAMI FL  DELETE 21 TITLE  DELETE 21 TITLE  DELETE 21 TITLE  22 NAME 22 NAME 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZP  TITLE  DELETE 31 TITLE  DELETE 31 TITLE  DELETE 31 TITLE  DELETE 31 TITLE  DELETE 41 TITLE  DELETE 41 TITLE  DELETE 31 TITLE  DELETE 31 TITLE  DELETE 40 DELETE 31 TITLE  DELETE 51 TITLE	· - · · · · · · · · · · · · · · ·				82	Street Add	Idress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33156  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 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, and accept the orbigations of, Section 607,0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  OFFICERS AND DIRECTORS  14. CONV.ST.2P  11. TITLE  ORAGE  12. TITLE  ORAGE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  14. CONV.ST.2P  15. TITLE  ORAGE  15. TITLE  ORAGE  16. Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  13. STREET ADDRESS  CITY.ST.2P  14. CONV.ST.2P  24. CITY.ST.2P  15. TITLE  ORAGE  15. TITLE  ORAGE  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ORAGE  ADDITIONS/CHAN	1								
### City ###				83				\	
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 of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Stata of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Stata of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the provision of	MIAMI FL 33156				R4	City	85 Zin Coo	le -	
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 am familiar with, and accept the obligations of, Section 607, 0505, Floridas Statutes.  SIGNATURE    Signature, Typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE						Ony	FL   FL	}	
Signature very printed name of registered agent and title if applicable.   (NOTE Registered Agent ag	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								
Signature very printed name of repitated agent and title if applicable.   (NOTE Regitation Agent age	]							ĺ	
TITLE	SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	OTE: Registered	Agent	signature requir	red when reinstating) DATE		
NAME   STEIN, BARRY A.   12 NAME   13 STREET ADDRESS	12.		DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
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NAME	CITY-ST-ZIP			2.4 CI	TY-ST	-ZIP			
STREET ADDRESS   3.3 STREET ADDRESS	TITLE		☐ DELETE	3,1 TIT	LE.		☐ Change	☐ Addition	
3.4. CITY-ST-ZIP     3.4. CITY-ST-ZIP     Change   Addition     NAME	NAME	•		3.2 NA	ME	1	• ;	ĺ	
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STREET ADDRESS   4.3 STREET ADDRESS	TITLE		☐ DELETE	4.1 TIT	LE.		☐ Change	Addition	
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TITLE         DELETE         5.1 TTLE         Change         Addition           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TTLE         Change         Addition	STREET ADDRESS			4.3 ST	REET A	NODRESS		ļ	
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CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-ST-ZIP			6.4 CIT	Y-ST-	ZIP	<u> </u>		

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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR