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FILED  
May 20 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S70182 (8)  
1. Corporation Name  
JML DESIGNS, INC.

Principal Place of Business

475 ROBERTS RD.  
OLDSMAR FL 34677  
US

Mailing Address

475 ROBERTS RD.  
OLDSMAR FL 34677-4919  
US

3. Date Incorporated or Qualified 08/01/1991  
3a. Date of Last Report 05/01/1996

4. FEI Number 59-3083480  
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 855 Donlin Ave.

Suite, Apt. #, etc.

22 City & State  
23 Oldsmar - FL

Zip

24 34677

Country

25 Pinellas

2a. Mailing Address

26 855 Donlin Ave.

Suite, Apt. #, etc.

27 City & State  
28 Oldsmar - FL

Zip

29 34677

Country

30 Pinellas

9. Name and Address of Current Registered Agent

LAFAYETTE, JOHN C  
3446 EAST LAKE RD.  
SUITE 212  
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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. 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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME LAMADRID JOSE M  
STREET ADDRESS 475 ROBERTS RD  
CITY-ST-ZIP OLDSMAR FL

TITLE S ☒ DELETE

NAME ZORBAS, ROBERT J  
STREET ADDRESS 475 ROBERTS RD.  
CITY-ST-ZIP OLDSMAR FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition

1.2 NAME LAMADRID, JOSE M  
1.3 STREET ADDRESS 855 Donlin Ave.  
1.4 CITY-ST-ZIP Oldsmar - FL 34677

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

600002198956  
-06/03/97--01006--012  
\*\*\*660.00

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

6/28/97 1837 287-1133

CR2E034 (9/96)