FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

0 4/3 1/96 904 705 2966
Dayler's Phone *

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DOC	U	М	E	N ⁻	Τ#

1. Corporation Name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S73756

(6)

IORDAN	INTERNATIONAL	MADICETING	INC
JUNUAN	INTERNATIONAL	MARKETING.	INC.

Principal Place of Business Mailing Address				i restrois tre tales bittle (d kg) Est	10 \$111 GIGIL BIEFI BIBIL				
			16 HOMESDALE RD. CKSONVILLE FL 32207						
						3. Date Incorporated or Qualified 08/13/1991	3a. Date of Last 05/01/		
		2a. Mailing Address	dress			4. FEI Number	L	Applied For	
21 26		···			59-3076864 Not Applica				
27		27	Suite, Apt. #, etc.		5. Cortificate of Status Desired	5 Additional Required			
City & State		City & State				Election Campaign Financing Trust Fund Contribution		00 May Be	
Zip	Country	Zip				R. This corporation has liability for intangible tax under s 199,032,			
4	25	29	30	.,		Florida Statutes X Yes		\$ 199,032,	
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re			
				81	Name				
	IN, RICHARD A.			82	Street Ac	ddress (P.O. Box Number is Not Acceptable	a)		
	IOLMESDALE RD.					ALCOS (TO CONTROL TO NOT PROSPERATE	2)		
JACKS	ONVILLE FL 32207		[B 3					
			-	84	City		85 2	Zip Code	
				- 1			F -1	•	
Or regratore	ed agent, or both, in the State of F h, and accept the obligations of, S	ionda. Soch change was authori	zea by the co	orpo	pration's bo	poration submits this statement for the purpoper of directors. I hereby accept the appoint	iose of changing its intment as registere	registered office d agent, I am	
SIGNATURE _	Signature, typed or printed name of registered a	grut and title it applicable (N	OTE Registered A	 Igenl	t sgnature regi	ined when reinstating)	DATE		
12.	OF FICERS :	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	ORS IN 12	
TITLE	D/P	☐ DELETE	1 1 1 11	LE			Change	Addition	
NAME	JORDAN, RICHARD A.		1.2 NAM	Æ					
STREET ADDRESS	1336 HOLMESDALE RD.		1.3 S1R	FET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL	P3 open	1.4 C/T		I - ZiP				
TITLE		☐ DELETE	2 1 717		İ		Change	Addition	
NAME CTREET ADDRESS			2 ? NAN						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	2 4 CiT		· ZiP			Fred A 1 Por	
NAME		L.J Decere	3 2 NAM				☐ Change	Addition	
STREET ADDRESS					ADDRESS	`	4		
DITY-ST-ZIP			3.4 CH						
TITLE		DELETE	4 1 [1]				[7] Change	☐ Addition	
NAME			4 2 NAN		ŀ		e.i.a.ige		
STREET ADDRESS			4.3 STR	EET a	ADDRESS				
CITY-ST-ZIP			4.4 CrTY	/~\$T	- ZiP				
TITLE		☐ DELF1E	5 1 TiTi	L E			☐ Change	Addition	
NAME			5.2 NAN	1E					
STREET ADDRESS			5.3 STR	EE1 /	ADDRESS				
CITY - ST - ZIP			5.4 CITY	′- \$T	- ZIF				
TITLE		DELETE	6. 1 TIT	F			☐ Change	Addition	
NAME			6.2 NAM	10					
STREET ADDRESS			63 STR	EET A	ADDRESS				
CITY-ST-ZIP	continue that the information as a side	al contraction of the contractio	6.4 CI? Y	- \$1	-712				
oath; that I		muai report of supplemental and porabor of the receiver or truste	iua: report is ie erunowere			for the exemption stated in Section 119.0 rate and that my signature shall have the si his report as required by Chapter 607, Flor			