FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

J.M.V., INC.

FILED Jan 20 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address										
							10011 411011 21011 21011 10111 10111 10111	*** ***** ***** ***)	
2640 TAMIAMI TRAIL E 2640 TAMIAMI TRAIL E										
NAPLES FL 33962			NAPLES FL 33962	NAPLES FL 33962			DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified			
							06/18/1992			
2.	Principat P	Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For	
21		26 3169 CARRIV			E C	IRCLE	65-0336737	N	ot Applicable	
	Suite, Apt.	e, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75	Additional	
22			27				5. Certificate of Status Desired	Fee R	equired	
	City & State				•		6. Election Campaign Financing	\$5.00	May Be	
23		~	28 NAPLES, FI				Trust Fund Contribution	Added	to Fees	
	Zıp	Country	Zip		Country		8. This corporation owes or has paid the o	— ' -	1	
24		25	[29] 34105	30 (ILLI	EK	Personal Property Tax due June 30.		No	
9, Name and Address of Current Registered Agent							10. Name and Address of New Registere	d Agent		
WILSON, GARY K					81 N	amo				
		00 FIFTH AVE S		82 S			ess (P.O. Box Number is Not Acceptable)			
SUITE 211				83						
NAPLES FL 33940					83					
				Ì	84 C	ity	F	85 Zip	Code	
44	Purcuant	to the provisions of Sections 607	0502 and 607 1509 Florida Statut	no the ph	040 00	med core	•	- , ,	to registered	
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.										
SIC	SNATURE				·• · · • · · · · · · · · · · · · · · ·					
	The second secon				Agent sig	gnature require	ed when reinstating) DATE	ND DIDEOTOL	20.01.40	
12.		D	AND DIRECTORS DELETE	13. 1.1 Til	· · · · · · · · · · · · · · · · · · ·	·	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
		•	, -	1		315-	RBARD, JUDITH MICHAEL	Change	LI Addition	
NAM	14.15.11.15.11.11.11.11.11.11.11.11.11.11.		IEL	1.2 NAME VE			169 (ARRIAGE CIRCLE			
	EET ADDRESS	ALABOO IOI ANID EI							-	
	Y-SI-ZIP	MARCO ISLAND FL	K DELETE		Y - ST - ZIF	, 1	APLES, FL 34105	Change	T gasses	
THIL		VEDBADO CTEVE A	N receive	2.1 TIT		۔ ا	ORANA CTIVE	LEG Change	Addition (
NAN		VERBARO, STEVE A					ERBARO, STEVE			
	EET ADDRESS	960 HURON CT #212-		2.3 STREET ADDRESS 3		RESS 3	69 CARRIABE CIRCLE			
	Y+ST-ZIP	MARCO ISLAND FL			2. 4 CITY - S1 - ZIP		APLES, FL 34105			
TITL	1	D MICHAEL CARDIELLE	☐ DELETE	3.1 7(1				Change	Addition	
NAN		(3.2 NA		-				
	EET ADDRESS	OLINIA ODDINOO TV		i i	REET ADDI	- 1				
	r-ST-ZIP	CHINA SPRINGS TX	T Kilis	3.4. CI		٩				
TITL			☐ DELETE	4.1 111				Change	☐ Addition	
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	(-ST-ZIP	<u></u>			Y - ST - Z(F	<u>`_</u>				
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NAM	AE			5.2 NA	ИE				-	
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CITY	-ST-ZIP		·	5.4 CIT	Y - ST - ZIF					
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STR	EET ADDRESS			6.3 STF	EE1 ADDE	RESS				
CITY	(-ST-ZIP			6.4 CI1	Y - \$1 - ZIP	,			1	

14. Thereby 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 eath; 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 VERBARO