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 #

(7)

JOHNSON SCHOOLS, INC.

May 05 1998 8:00am Secretary of State

FILED



Principal Place of Business Mailing Address								BIBIS 1881	
808 S.E. 4TH FT LAUDERD US	1 ST. IALE FL 33301	808 S.E. 4TH ST. FT LAUDERDALE FL 33301 US				DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualified 05/30/1963 			
	lace of Business	2a. Mailing Address				4. FEI Number	A	oplied For	
21		26				59-1005428	N	ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	Θ	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	
ZIP	<u></u>			Country 8. This corporation owes or has paid the current year Intangible					
24	29 30			,		Personal Property Tax due June 30. Yes No			
ļ	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Register	ed Agent		
	DYLE, DAWN J			81	Name				
	8 S. E. 4TH ST. . Laude rdale fl 33301				Street Ad	ess (P.O. Box Number is Not Acceptable)			
				83					
				84	City		· L	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 age	· · · · · · · · · · · · · · · · · · ·	II Registere	d Age	nt signature rec	ADDITIONS/CHANGES TO OFFICERS A		20 (N. 10	
12. TITLE	OFFICE HS AND DIRECTORS DELETE			1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
NAME	DOVIC DAUMI I		1.2 N				Li Oriango	- Audition	
STREET ADDRESS	808 S.E. 4TH ST.		1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		1.4 CITY-ST-ZIP		1			[
TITLE			2.1 TI		1-21		Change	Addition	
NAME	BOME BANKS A			2.2 NAME					
STREET ADDRESS	808 S.E. 4TH ST.		2.3 STREET ADDRESS		223ROOA	P.			
CITY-ST-ZIP	•	ET LAUDEDDALE, EL 00000		2. 4 CITY-ST-ZIP					
TITLE	D			3.1 TITLE			Change	Addition	
NAME	BRICKLEY, L CRAWFORD			3.2 NAME					
STREET ADDRESS	800 F 00 OT 10T 100F D		3.3 STREET ADDRESS		ADDRESS				
CITY+ST-ZIP	AIDM VODE AIV		3.4. C		1				
TITLE				TLE			Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE		ADDRESS				
CITY-ST-2IP			4.4 CI	TY- \$1	T - ZIP				
TITLE		☐ DELETE	5.1 TI	TLE			Change	☐ Addition	
NAME			5 2 N/	AME					
STREET ADDRESS			5.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-\$1	T- ZIP				
TITLE				6 1 TITLE			☐ Change	☐ Addition	
NAME			6.2 N/	AME					
STREET ADDRESS			63 ST	NEET .	ADDRESS				
CITY-ST-ZIP			6 4 CI	TY-SI	I - ZIP				
	certify that the information supplied wi	th this filing does not quality!	for the exe	emot	ion stated	in Section 119.07(3)(i). Florida Statutes, I further	certify that the	information	

1 hereby certify that the information supplied with this filing doles not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the immunity report is 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 trusted tempowered 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 attackment with an address