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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

•	1996	DIVISION OF C	ORPORATIONS		
DOCUN 1. Corporation	MENT # <b>J4155</b> 4	4 (3)			
J. RUB	BINTON ENTERPRISES, INC				
				) (400) (10 0) (4 1) (6 1) (6 1) (7 1) (7 1) (7 1)	
Dissipat Plans	-4 D1				
Principal Place	•	Mailing Address			
7036 VERDE WAY NAPLES FL 33963 US  7036 VERDE WAY NAPLES FL 33963 US  US					
				3. Date Incorporated or Qualified 11/06/1986	3a. Date of Last Report 02/14/1995
2. Principal Pla		2a. Mailing Address 26 7033 VE	FORELIAN	4. FEI Number 59-2740672	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.	EDE WAY		CR 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	÷,	6. Election Campaign Financing	\$5.00 May Be
23 NAP	CES FL Country	28 NAPLES F	Country	Trast rand Continuation	Added to Fees
<sup>24</sup> 3396			30]	8. This corporation has liability for interest Florida Statutes 11 Yes	angicie tax under s. 199.032,
-:1	9. Name and Address of Current		-	10. Name and Address of New Reg	
			81 Name		
GARLICK, THOMAS B., ESQ.  82 Street Address (P.O. Box Number is Not Acceptable)					
800 LAUREL OAK DR					
SUITE 4	00 FL 33963		83		
NAPLES	FL 33903		84 City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607,1508. Florida Statutes	the above-named co	poration submits this statement for the purpo	se al changing its registered office
or registere	ed agent, or both, in the State of Florid h, and accept the obligations of, Section	la. Such change was authorized.	by the corporation's t	poard of directors. I hereby accept the appoint	tment as registered agent. I am
SIGNATURE _	II, and added to deligations of, cook	on controller, monda statutes.			
	Signature, typed or printed name of registered agent a	<del> </del>	Registered Agent signature re		DATE
12.	OFFICERS AND	DIRECTORS  T DELETE	13.	ADDITIONS/CHANGES TO OFFICE	
NAME	RUBINTON, JON		1. 1 TITLE 1.2 NAME	DP	Change 🔲 Addition
STREET ADDRESS	-7036-VERDE-WAY		13 STREET ADDRESS	RUBINTON, JON 1033 VERDE WAY	
CITY-ST-ZIP	NAPLES FL		14 CITY-ST-ZIP	NAPLES FL 33%	3
TITLE		☐ DELETE	2. 1 TITLE	3411	☐ Change ☐ Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP		T MILET	2.4 C(TY - ST - Z(P		F1 0: F1 4.48
TITLE NAME		☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME  3.3. STREET ADDRESS		
CITY-ST-ZIP			3.4 City-ST-ZIP		
TITLE		☐ DELETE	4.1 THLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	,		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6. 1 TITLE		Change Addition
NAME			6.2 NAME		्रा कार्याच्या । । । । । । । । । । । । । । । । । । ।
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I do hereby	y certify that the information supplied w	rith this filing is voluntarily furnish	ed and does not qual	fy for the exemption stated in Section 119.07 curate and that my signature shall have the sa this report as required by Chapter 607, Floric	(3)(k) Florida Statutes. I further
oath; that I	am an officer or arestor of the corpor	ation or the receiver or trustee e	mpowered to execute	this report as required by Chapter 607, Florid	da Statutes; and that my name

JON RUBINTON 3/15/96 (941) 566-9500