

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

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra W. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT  
1. Corporation Name **J. H. MILITARY TRAINING, INC**  
**J 78918**



Principal Place of Business <b>29 S.E. 5th Street Boca Raton, FL 33432</b>	Mailing Address <b>29 S.E. 5th Street Boca Raton, FL 33432</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>65-0023221</b>	Applied For: <input type="checkbox"/> Not Applied
21. Suite - Apt. #, etc.	2a. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
23. Zip Country	28. Zip Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**John J. Matteis  
29 S.E. 5th Street  
Boca Raton, FL 33432**

10. Name and Address of New Registered Agent

31. Name
32. Street Address (P.O. Box Number is Not Acceptable)
33.
34. City
35. 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, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>Pres., Sec., Treas.</b>	<input type="checkbox"/> DELETE	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME <b>Jens Juul-Hansen</b>		12. NAME	
STREET ADDRESS <b>29 SE 5th Street</b>		13. STREET ADDRESS	
CITY-STATE-ZIP <b>Boca Raton, FL 33432</b>		14. CITY-STATE-ZIP	
TITLE <b>V.P., Ass't. Secretary</b>	<input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME <b>John J. Matteis</b>		22. NAME	
STREET ADDRESS <b>29 SE 5th Street</b>		23. STREET ADDRESS	
CITY-STATE-ZIP <b>Boca Raton, FL 33432</b>		24. CITY-STATE-ZIP	
TITLE <b>V.P.</b>	<input type="checkbox"/> DELETE	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME <b>Thomas Juul-Hansen</b>		32. NAME	
STREET ADDRESS <b>29 S.E. 5th Street</b>		33. STREET ADDRESS	
CITY-STATE-ZIP <b>Boca Raton, FL 33432</b>		34. CITY-STATE-ZIP	
TITLE <b>V.P.</b>	<input type="checkbox"/> DELETE	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME <b>Nils Juul-Hansen</b>		42. NAME	
STREET ADDRESS <b>29 SE 5th Street</b>		43. STREET ADDRESS	
CITY-STATE-ZIP <b>Boca Raton, FL 33432</b>		44. CITY-STATE-ZIP	
TITLE <b>V.P.</b>	<input type="checkbox"/> DELETE	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME <b>Knud Juul-Hansen</b>		52. NAME	
STREET ADDRESS <b>29 S.E. 5th Street</b>		53. STREET ADDRESS	
CITY-STATE-ZIP <b>Boca Raton, FL 33432</b>		54. CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-STATE-ZIP		64. CITY-STATE-ZIP	

400002532694  
-05/22/98--01013--027  
\*\*\*150.00

*[Handwritten initials]*

14. I, the undersigned, certify that the information furnished herein is true and correct, and that I am an authorized officer or director of the corporation, and that my signature shall have the same legal effect as if made under oath; that I am an authorized officer or director of the corporation, and that my signature shall have the same legal effect as if made under oath; that I am an authorized officer or director of the corporation, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Handwritten Signature]*