

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northing  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **K11323** (8)

1. Corporation Name  
**JTECH INCORPORATED**

Principal Place of Business      Mailing Address  
**2029 N. DODD HWY**      **2029 N. DODD HWY**  
**POMPANO BEACH FL 33080**      **POMPANO BEACH FL 33080**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**01/06/1988**      **06/29/1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0023121		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		X \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		□ \$5.00 May Be Added to Fees	
City & State		City & State		6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		□ Yes □ No	
23		28		24		25	
Zip		Country		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of Now Registered Agent			
GRAHAM, JEFFREY J., SR. 947 FERN DRIVE DELRAY BEACH FL 33483				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City		B5 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \*      Signature (hand or printed name of registered agent and title if applicable)      (NOTE: Registered Agent signature required when re-registering)      DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCT	11 TITLE	□ Change □ Addition
NAME	GRAHAM, JEFFREY J., SR.	12 NAME	000001486390
STREET ADDRESS	947 FERN DRIVE	13 STREET ADDRESS	-05/12/95--01108--005
CITY- ST- ZIP	DELRAY BEACH FL	14 CITY- ST- ZIP	*****8.75 *****8.75
TITLE	SD	21 TITLE	□ Change □ Addition
NAME	GRAHAM, JEFFREY J., JR.	22 NAME	000001486390
STREET ADDRESS	2510 NE 51ST STREET	23 STREET ADDRESS	-05/12/95--01108--006
CITY- ST- ZIP	LIGHTHOUSE POINT FL	24 CITY- ST- ZIP	****225.00 ****225.00
TITLE	VD	31 TITLE	□ Change □ Addition
NAME	HALLIBURTON, RONALD	32 NAME	
STREET ADDRESS	951 FERN DR.	33 STREET ADDRESS	
CITY- ST- ZIP	DELRAY BEACH FL	34 CITY- ST- ZIP	
TITLE	DP	41 TITLE	X Change □ Addition
NAME	MILLER, DAVID T.	42 NAME	
STREET ADDRESS	2091 SW BRIGHTON WAY	43 STREET ADDRESS	4175 S.W. OAKHAVEN LANE
CITY- ST- ZIP	PALM CITY FL	44 CITY- ST- ZIP	PALM CITY, FLA 34990
TITLE		51 TITLE	□ Change □ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY- ST- ZIP		54 CITY- ST- ZIP	
TITLE		61 TITLE	□ Change □ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY- ST- ZIP		64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 oath, 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 of this filing, or on an attachment with an address.

SIGNATURE: *Jeffrey J. Graham Sr.*      **Jeffrey J. Graham Sr.**      5/10/95      305-7840700  
SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      (Date)      (Telephone #)      **K116**