

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # K43838 (7)

1. Corporation Name

JOHAN & YORK, INC.



Principal Place of Business

Mailing Address

**6000 S RIO GRANDE
S204
ORLANDO FL 32809**

**6000 S RIO GRANDE
S204
ORLANDO FL 32809**

2. Principal Place of Business

21 5858 INTERNATIONAL DR

2a. Mailing Address

26 5447 BROOKLINE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 ORLANDO FLORIDA

27 ORLANDO

City & State

City & State

23 32819 U.S.A.

28 FLORIDA

Zip

Country

Zip

Country

24 32819 25 U.S.A.

29 32819 30 U.S.A.

9. Name and Address of Current Registered Agent

**NANA, J. D.
6000 S RIO GRANDE AVE
S204
ORLANDO FL 32809**

10. Name and Address of New Registered Agent

**81 Name J.D. NANA.
82 Street Address (P.O. Box Number is Not Acceptable) 5447 BROOKLINE DRIVE
83 ORLANDO
84 City FLORIDA FL 85 Zip Code 32819**

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] **J.D. NANA**

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	NANA, J.D.	
STREET ADDRESS	6000 S RIO GRANDE #204	
CITY-ST-ZIP	ORLANDO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 119.07(3)(g), Florida Statutes. I further certify that the information included on this annual report or supplement if 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* J.D. NANA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-7-96

407-876-4752

CR2E034 (3/96)