


**FILED**  
**Apr 27, 1999 8:00 am**  
**Secretary of State**

04-27-1999 90031 050 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katharine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P94000051748**

1. Corporation Name  
**JACK BREEN COMPANY**



Principal Place of Business 5524 APALACHEE PKY TALLAHASSEE FL 32311 US	Mailing Address 5524 APALACHEE PKY TALLAHASSEE FL 32311 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 <u>SAME</u>		26 <u>SAME</u>		07/13/1994	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 City & State		28 City & State		NOT APPLICABLE	
24 Zip		29 Zip		5. Certificate of Status Desired <input type="checkbox"/>	
25 Country		30 Country		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DIESTELHORST, JACK 2701 EVERETT LANE TALLAHASSEE FL 32312				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				<b>FL</b>			

11. Pursuant to the provisions of Sections 607.050; 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]* V.P. DATE: 5/5/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	P, STD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIESTHORST, JACK	1.2 NAME	Jack Diesthorst
STREET ADDRESS	2701 EVERETT LANE	1.3 STREET ADDRESS	2701 Everett Lane
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	Tallahassee, FL 32312
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	VP <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOLOMON, DEBRA	2.2 NAME	Debra Solomon
STREET ADDRESS	2070 SOLOMON CT	2.3 STREET ADDRESS	2070 Solomon Ct
CITY-ST-ZIP	TALLAHASSEE FL 32308	2.4 CITY-ST-ZIP	Tallahassee, FL 32308
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRASWELL, FLECIA	3.2 NAME	
STREET ADDRESS	810 MIDDLEBROOK CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 3(i), 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 if changed, or on an attachment with an address, with a different like empowered.

SIGNATURE: *[Signature]* V.P. DATE: 5/5/99 DAYTIME PHONE #: 656-3028

CR2E034 (11/98)