

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

FILED  
Apr 16 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000056882 (0)

1. Corporation Name  
JUPITER DANCE ACADEMY, INC.



Principal Place of Business  
10268-150TH COURT NORTH  
JUPITER FL 33478

Mailing Address  
10268-150TH COURT NORTH  
JUPITER FL 33478-6868

3. Date Incorporated or Qualified  
07/24/1995

3a. Date of Last Report  
02/28/1996

4. FEI Number  
65-0601024

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country  
24

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29

30

9. Name and Address of Current Registered Agent

PUMPHREY, DEBRA A  
10268-150TH COURT NORTH  
JUPITER FL 33478

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 - typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

|                 |                         |                                 |
|-----------------|-------------------------|---------------------------------|
| TITLE           | D                       | <input type="checkbox"/> DELETE |
| NAME            | PUMPHREY, DEBRA A       |                                 |
| STREET ADDRESS  | 10268-150TH COURT NORTH |                                 |
| CITY - ST - ZIP | JUPITER FL 33478        |                                 |
| TITLE           | D                       | <input type="checkbox"/> DELETE |
| NAME            | PUMPHREY, RONALD R      |                                 |
| STREET ADDRESS  | 10268-150TH COURT NORTH |                                 |
| CITY - ST - ZIP | JUPITER FL 33478        |                                 |
| TITLE           |                         | <input type="checkbox"/> DELETE |
| NAME            |                         |                                 |
| STREET ADDRESS  |                         |                                 |
| CITY - ST - ZIP |                         |                                 |
| TITLE           |                         | <input type="checkbox"/> DELETE |
| NAME            |                         |                                 |
| STREET ADDRESS  |                         |                                 |
| CITY - ST - ZIP |                         |                                 |
| TITLE           |                         | <input type="checkbox"/> DELETE |
| NAME            |                         |                                 |
| STREET ADDRESS  |                         |                                 |
| CITY - ST - ZIP |                         |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |   |
|---------------------|---|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            |   |
| 1.3 STREET ADDRESS  |   |
| 1.4 CITY - ST - ZIP |   |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            |   |
| 2.3 STREET ADDRESS  |   |
| 2.4 CITY - ST - ZIP |   |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |   |
| 3.3 STREET ADDRESS  |   |
| 3.4 CITY - ST - ZIP |   |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |   |
| 4.3 STREET ADDRESS  |   |
| 4.4 CITY - ST - ZIP |   |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |   |
| 5.3 STREET ADDRESS  |   |
| 5.4 CITY - ST - ZIP |   |
| 6.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *Debra Pumphrey* Debra Pumphrey ✓ 4/10/96 ✓ 561-747-7133  
SIGNATURE AND TYPED OR PRINTED NAME OF FORMING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)