

FILE NOW: FILING FEE AFTER MAY 1 IS \$500.00

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Mar 18 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. McDaniel</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # P95000097839 (1)**

1. Corporation Name  
**JOHN AND JEANNE HURTAK CORP.**

Principal Place of Business <b>525 N.E. 58TH STREET</b> <del>SUITE 0000</del> -OUT <b>MIAMI FL 33137</b> <b>US</b>	Mailing Address <b>525 N.E. 58TH STREET</b> <del>SUITE 0000</del> -OUT <b>MIAMI FL 33137-2630</b> <b>US</b>
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2. Principal Place of Business 21 <b>525 N. E. 58th Street</b> Suite, Apt. #, etc. 22 <b>-----no suite number----</b> City & State 23 <b>Miami, Florida</b> Zip 24 <b>33137-2630</b>	2a. Mailing Address 26 <b>525 N. E. 58th Street</b> Suite, Apt. #, etc. 27 <b>-----no suite number----</b> City & State 28 <b>Miami, Florida</b> Zip 29 <b>33137-2630</b> Country 25 <b>U.S.A.</b> 30 <b>U.S.A.</b>
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3. Date Incorporated or Qualified <b>12/28/1995</b>	3a. Date of Last Report <b>02/20/1996</b>
4. FEI Number <b>65-0632965</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HURTAK, JEROME ESQ**  
**10800 BISCAYNE BOULEVARD**  
**SUITE #520**  
**MIAMI FL 33161**

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
05 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>D P</b> <input type="checkbox"/> DELETE
NAME	<b>HURTAK, JOHN J</b>
STREET ADDRESS	<b>525 N.E. 58TH STREET</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>D S</b> <input type="checkbox"/> DELETE
NAME	<b>HURTAK, JEANNE B</b>
STREET ADDRESS	<b>525 N.E. 58TH STREET</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
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 any attachment with an address.

SIGNATURE:

*John J. Hurtak*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 12, 1997

(305) 757-5807

Date

Daytime Phone #

CR2E034 (9/96)