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May 09 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1996
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Northon
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # V59318 (8)

1. Corporation Name
 J.P.B. ENTERPRISES, INC.

Principal Place of Business Mailing Address
 C/O NICHOLAS H. HAGOORT, JR.
 1901 S. CONGRESS AVE., SUITE 300
 BOYNTON BEACH FL 33426
 C/O RICHARD A. MARTEL
 P O BOX 3418
 AUBURN ME 04210
 US

3. Date incorporated or Qualified 06/21/1992
 3a. Date of Last Report 01/24/1995

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 28 % Robert W. Savoy
 22 City & State 27 8808 CENTRE PARK DR., STE 204
 23 City & State 29 COLUMBIA, MARYLAND
 24 Zip 25 Country 28 21045 30 USA

4. FBI Number 59-2203485
 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Elected 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

9. Name and Address of Current Registered Agent
 HAGOORT, NICHOLAS H., JR.
 1901 S. CONGRESS AVE.
 SUITE 300
 BOYNTON BEACH FL 33426
 10. Name and Address of New Registered Agent
 B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. REGISTERED AGENTS	
12.1 TITLE PT	12.2 NAME BOLDUC, J.P.	13.1 TITLE PT	13.2 NAME BOLDUC, J.P.
12.3 STREET ADDRESS 3000 SOUTH OCEAN BLVD. APT. 1402	12.4 CITY, ST., ZIP BOCA RATON FL 33432	13.3 STREET ADDRESS 13237 WESTMEATH LANE	13.4 CITY, ST., ZIP CLARKSVILLE, MD 21029
12.5 TITLE S	12.6 NAME BOLDUC, EVELYN T.	13.5 TITLE S	13.6 NAME BOLDUC, EVELYN T.
12.7 STREET ADDRESS 3000 SOUTH OCEAN BLVD. APT. 1402	12.8 CITY, ST., ZIP BOCA RATON FL 33432	13.7 STREET ADDRESS 13237 WESTMEATH LANE	13.8 CITY, ST., ZIP CLARKSVILLE, MD 21029
12.9 TITLE [Blank]	12.10 NAME [Blank]	13.9 TITLE [Blank]	13.10 NAME [Blank]
12.11 STREET ADDRESS [Blank]	12.12 CITY, ST., ZIP [Blank]	13.11 STREET ADDRESS 900002186079	13.12 CITY, ST., ZIP [Blank]
12.13 TITLE [Blank]	12.14 NAME [Blank]	13.13 TITLE [Blank]	13.14 NAME [Blank]
12.15 STREET ADDRESS [Blank]	12.16 CITY, ST., ZIP [Blank]	13.15 STREET ADDRESS [Blank]	13.16 CITY, ST., ZIP [Blank]
12.17 TITLE [Blank]	12.18 NAME [Blank]	13.17 TITLE [Blank]	13.18 NAME [Blank]
12.19 STREET ADDRESS [Blank]	12.20 CITY, ST., ZIP [Blank]	13.19 STREET ADDRESS [Blank]	13.20 CITY, ST., ZIP [Blank]

Post-it® Fax Note 7871 Date 4-29-97 Pages 1
 To Bob Savoy From Joe Novotny
 Co./Dept. Co.
 Phone # Phone # 210 268-6154
 Fax # 410 834-1457 Fax #

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 199.02(2)(A), 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 a 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 207, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attachment with an address.

SIGNATURE: [Signature] J.P. Bolduc President 4/29/97 410-884-1960

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