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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name 470756

(8)

	/ OF JAX BEACH, INC.			 	-
Principal Place of Business Mailing Address 1712 BEACH BLVD. JACKSONVILLE BCH. FL 32250 Mailing Address 1712 BEACH BLVD. JACKSONVILLE BCH. FL 32250 JACKSONVILLE BCH.			/D. 3CH. FL 32250	H. FL 32250	
				3. Date Incorporated or Qualified 03/20/1975	3a. Date of Last Report
	Place of Business	2a. Malfing Address		4. FEI Number	04/14/1995
Suite, Apt.	# oto	26		59-1579604	Applied For
22	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Stat	e	City & State			Fee Required
23		28		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
4	25	29	30	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032,
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	NO Registered Agent
17414	ri, stephan s.		81 Name		registered Agent
	BEACH BLVD.		82 Street Ar	ddress (P.O. Box Number is Not Acceptab	1-1
	SONVILLE BEACH FL 32250		L	- Total de la Maria de Maria Acceptado	le)
1011	OFFICE BEHOIT IE SEESO		83		
			84 City		
11. Pursuant t or register	o the provisions of Sections 607.0502 and agent, or both, in the State of Florida	and 607,1508, Florida Statu	ites, the above-named corp	poration submits this statement for the purporard of directors. I hereby accept the appo	FL 85 Zip Code
familiar wit					introped as a second of the
SIGNATURE	, solution of decide	Troom.0000, Florida Statute	s.	т и от алевтого. Тпогору ассерт те арро	internent as registered agent. I am
SIGNATURE	Signature, typed or pented curne of registered a per la	id tilk Mappilicade.	·s.	ασουρι της αμρο	mitment as registered agent. I am
SIGNATURE _	, solution of decide	id tilk, ir applicance. (N DIRECTORS	OTL Registered Agent signature requi	afford where reinstating)	DATE
SIGNATURE	Signature, typed or pointed rather of registrated apert a OFFICERS AND	id tilk Mappilicade.	OIL Hagastered Agent signature requi	ασουρί (πο αμρο	DATE
SIGNATURE	Signature, typed or pented curie of registrated apert a OFFICERS AND P MACRI, STEPHAN S. 41 SOUTH ROSCOE BLVD.	id tilk, ir applicance. (N DIRECTORS	OTE Hispotered Agent signature requirements and the second signature requirements at 1.1 Title 1.2 NAME	afford where reinstating)	DATE CERS AND DIRECTORS IN 12
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SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: