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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary #/ State ... DIVISION OF CORPORATIONS

DOCUMENT # 519621

JASON ENTERPRISES, INC.

FILED Jul 14 1997 8:00am Secretary of State

Principal Place of Business Mailing Address		(46616) Bilay Dian 1014 Bilia dian di	il Gibts migst Billis Albit athis Athre 1981	
14765 S. DIXIE HWY MIAMI FL 33178	14765 S. DIXIE HWY MIAMI FL 33176-7927			
			3. Date Incorporated or Qualified 12/03/1976	3a. Date of Last Report 05/01/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-1705612	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stato	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24 25		30		Yes No
9, Name and Address of C	urrent Registered Agent	81 Name	10. Name and Address of New Re	· · · · · · · · · · · · · · · · · · ·
JASON, JASON A.		ا المالات	Hrey Schatzm ress (F.O. Box Number is Not Acceptal S. Dade Jand	AN
11100 G. DIAIL 11111.		82 Street Add	ress (F.O. Box Number is Not Acceptal	ole) Na a a a a a a a a a a a a a a a a a a
·		83	S. SHEE JANA	OIV G
t.		341	R 700	
ī		84 City	i Ami	FL 85 Zip Code
11. Pursuant to the provisions of Sections 60	7,9502 and 607,1508, Florida Statutes	, the above-named corp	poration submits this statement for the p	ourpose of changing its registered
11. Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with, and accept the	oblinations of Section 60 0505. Flori	ithorized by the corpora <u>ida</u> Statutes.	tion is board of directors, it hereby acce	pr the appointment as registered
SIGNATURE	JE!	Arcy SC 4447 Register a Agent signature requi	MAN	2/20/97
Signature, typed or printed name of registo	S AND DIRECTORS	Register a Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	PATE /
TITLE PB	DELETE	1.1 Till { }	4765 S. Dixie H	
NAME JASON, JASON A. JR.		1.2 NAME	Miami, FL. 331	
STREET MODRESS 7840 S.W. 120TH ST.		1.3 STREET ADDRESS	2. 120x 56026	iÕ
CITY-ST-ZIP MIAMIFE		14 CITY - ST - ZiP		95 6
THILE	DELETE	21 TITLE	•	Change Addition
NAME		2 2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DECETE	2. 4 CHY-SI-ZIP 3.1 THUE		Change Addition
NAME	C) West	3.2 NAME		C Suprigo C Notified
STREET ADDRESS		3.3 STREET ADDRESS		
DITY-ST-ZIP		3 4. CITY - ST - ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE.	4.4 CHY-S1-ZIP		Change Addition
TITLE NAME	LJ DELC H.	5.1 TITLE 5.2 NAME		L. Change L. Adonion
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5.4 C(1Y - S1 - Z(P		
TITLE	DELETE	6.1 THLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STHEET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-7IP		

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.