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

**PROFIT CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

POCUMENT #

586276

(8)

J.P. NAPIER, INC.

**FILED** Feb 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address		Mailing Address			I BIBIT BIBIT BIBIK BIBIT IBBI
10756 SW 188TH ST		10756 SW 188TH ST			
MIAMI FL 33157		MIAMI FL 33157		DO NOT MIDITE IN TUIC COACE	
US		US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				06/07/1978	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1880324	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]		- Continuate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28   	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8- This corporation owes or has paid the cu Personal Property Tax due June 30.	irrent year intangible
	9. Name and Address of Curre			10. Name and Address of New Registered	<del></del>
NAPIER, J.P. 81 Nappe CEO F NA DIED					
17000 COLITA DIVIE LIND				ddress (P.O. Box Number is Not Acceptable)	
PERRINE FL 33157				56 5W 1880 ST	
83					
			84 City		85 Zip Code
			mi	AM/ FL	.  3 <i>3/57</i>
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE   Signature typed or profiled manife of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE					
12.		ID DIRECTORS	13.	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	NAPIER, J.P.	, ,	1.2 NAME	ROGER E. NAPIER	
STREET ADDRESS	10756 SW 188TH ST		1.3 STREET ADDRESS	10756 500 18824 57	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI FL 3315	<b>7</b>
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	•		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-S1-2IP		T pereve	2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change   Addition
NAME STREET ADDRESS			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3 3 STREET ADDRESS		
TITLE		DELETE	3.4. City-St-ZiP 4.1 Title	——————————————————————————————————————	Change Addition
NAME		End Descrip	4. 2 NAME		C VINNING C MOUNTON
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		. —
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
THE I DOLODIC O	active that the information equalized w			in Coation 110 07(3Vi) Florida Ctatutas I further as	

Indicated on this annual report or supplied with this hing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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