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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600000535 (2)

J.S. COMPUTER, INC., OF OHIO

FILED Apr 14 1997 8:00am Secretary of State

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| Principal Place of Business 514 77H AVENUE WEST RADENTON FL 34205 | | 1514 7TH A | Mailing Address 1514 7TH AVENUE WEST BRADENTON FL 34205-6707 | | | į | . 1001100 1110 15119 51111 45111 45111 45111 55111 55101 51101 51101 5111 1521 | | | | |
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| | | | | | | | 3. Date Incorporate 01/31/1996 | d or Qualified | 3a. Dat | e of Last | Report |
| 2. Principal | Place of Business | 2a. Mailing | Address | | | | 4. FEI Number | ······ | | | Applied For |
| 1] | | 26 | | | | | 34-1714135 | | | | Not Applicab |
| Suite, Ap | ot. #, etc. | ļ | pt. #, etc. | | | | 5. Certificate of Stat | us Desired | | | Additional |
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| ា City & Sta បា | (ate | City & 5 | state | | | | 6. Election Campaig | - | | | May Be |
| 3 Zip | Country | 28 Zip | | Coun | dry | | Trust Fund Contri | | | | d to Fees |
| 1 | 25 | 29 | | 30 | y | | This corporation to Florida Statutes | | Yes | | 6. 199.032, |
| <u> </u> | 9. Name and Address of Cur | | nent | 1901 | | | 10. Name and Addres | | | | |
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| | ADENTON FL 34205 | | | ' | O# 0116 | er Moores | i isdinuri xod .o. ij ed | - HOL ACCEPIAL | (מות) | | |
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| | | AND DIRECTORS | DELETE | 13. | · · · · · · · · · · · · · · · · · · · | aluie requies | ADDITIONS/CHAN | GES TO OFFIC | | DIRECTO | |
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6. If do hereity certify that the information supplied with this filling 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 path; 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 attacty florid with an address.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/97

/941-748-Davime Phone # /949