## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Socretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # F98375 (1) JORSON ENTERPRISES, INC. Principal Place of Business Mailing Address % ADAM A JORGENSEN 1911 NW 36 ST 915 MIDDLE RIVER DRIVE. STE 415 FT LAUDERDALE FL 33304 OAKLAND PARK FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 09/07/1982 04/18/1996 26. Mailing Address 26 | 911 NW 34 ST. 4. FEI Number 2. Principal Place of Business Applied For 59-2228492 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Bo 6. Election Campaign Financing DAKLAND PARK, FL 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property 1ax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Jorgensen, adam a 1911 NW 36 ST. - 015 MIDDLE RIVER DRIVE, STE 415" Oakland Park, 83 FL 33309-57538 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 03304 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 (NO1£: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 THE JORGENSEN, ADAM A NAME 1.2 NAME 1911 NW 36TH ST STREET ADDRESS 1.3 STREET ADDRESS OAKLAND PARK, FL-00000- 33309-5153 CITY-ST-7IP 1.4 CHY-SI-7IP TITLE 21 THLE Change Addition JORGENSEN, BIRTE L NAME 2.2 NAME 300002248143---07/25/97--01092--011 1911 NW 36TH ST STREET ADDRESS 2.3 STREET ADDRESS OAKLAND PARK, FL-60000- 33309-5753 \*\*\*\*165.00 \*\*\*\*165.00 Change Addition CITY-ST-ZIF 2 4 City-St-ZiP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STHEET ADDRESS CITY-ST-ZIP 3.4. CITY- \$1 - ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TOLE Change Addition NAME 5.2 NAME STREET ADDRÉSS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-ZIP DELFTE TITLE 6.1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 C(1Y - S1 - Z(P) 14. I do hereby 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 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 a stackprient with an address.

7016.15/199