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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(7)

FILED May 12 1998 8:00am Secretary of State

JUPITER LAND INVESTMENTS, INC	U.					
Principal Place of Business	Mailing Address			-	II BEBLI DIQEI BIBIL BIBEL D	
4385 OKEECHOBE BLVD SUITE B-10 W.P.B FL 33409	528 BRACKE NWOOD PL PALM BEACH GARDE NS FL 33418 US		DO NOT WRITE	IN THIS SPACE		
US				3. Date Incorporated or Qualified	•	
2. Principal Place of Business	2a. Mailing Address			09/08/1982 4. FEI Number		Applied For
21	26			59-2239084	├├ -	Not Applicable
Suite, Apt. #. etc.	Suite, Apt. #, etc.					Additional
22	27	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	Fee I	Required
City & State	City & State			6. Election Campaign Financing		May Be
Zip Country	28	Country		Trust Fund Contribution		d to Fees
24 25	29	30		 This corporation owes or has pa Personal Property Tax due June 	p	ntangible
9. Name and Address of Curren		1001		10. Name and Address of New Re		
MATT SO N, DOUGLAS K		81	Name			
528 BRACKENWOOD PL		82	Street Addres	ss (P.O. Box Number is Not Acceptab	ole)	
PALM BEACH GARDENS FL 33418		83				
		83				
		84	City		FL 85 Zig	Code
11. Pursuant to the provisions of Sections 607.0502	2 and 607 1508, Florida Stat	lutes, the above-	named corpor	ration submits this statement for the p		its registered
office or registered agent, or both up the State i	of Florida, Such change was	s authorized by t	the corporation	in's board of directors. I hereby accept	of the appointment a	s registered
agent. Lam familiar with, and accept the obliga	tions of Section 607.0505. I	Florida Statutes.		,		
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations. 	thons of, Section 607.0505, I	Florida Statutes.	, , , , , , , , , , , , , , , , , , , ,	,		
SIGNATURE Signature, typed or printed name of regulated separations	otaa oʻtille if appleable (No	OTE: Registered Agent		d when coinstating)	DATE	
SIGNATURE Signature, typed or printed name of regels include part. 12. OF FICERS AND	of and title if applicable (No) DIRECTORS	OTE: Registered Agent	t signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTO	DRS IN 12
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indicated on this annual report or supplemental invalid 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 corpolator or trusted 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, provide an allectment with an address.