PROFIT CCRPORATION ANNUAL REPORT 1999

JURY SELECTION, INC.

1. Corporat on Name

DOCUMENT # G10677



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90197 042 ***150.00

- 1 FRANKIN KARANTAN KANDARAN KANDARAN KANDARAN KANDARAN BANDARAN BANDAR BANDAR BANDAR BANDAR BANDAR BANDAR BA

District District	/ Di	Mailing Address			[!			
Principal Ptace of Business		Mailing Address						
	₽	P.O. BOX 22-3100 HOLLYWOOD FL			DO NOT WRITE IN THIS SPACE			
2504 S. TOWER HOLLYWOOD FL 33 HOLLYWOOD FL 33019 2. Principal Place of Business 21 26 HOLLYWOOD FL 33			3. Date Incorporated or Qualifed					
					11/12/1982			
2. Principal Place of Business		2a. Mailing Addre	2a. Mailing Address		4. FEI Number		Appl ed For	
21		26			59-2240115		Not Applicable	
==1		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
¬ ′	ie	City & State			6. Electior Campaign Financing Trust Fund Contribution	•	0 Nay Be d to Fees	
Zip 24	Country 25	Zip 29	70 30	ountry	This co poration owes the current year in Personal Property Tax.	itangible ☐ Yes	83No	
	9. Name and Address of Cu				10. Name and Address of New Registered	l Agent		
1201	ike, Jay 1 S. Ocean dr., 2504 sout				Address (P.O. Box Number is Not Acceptable)			
HCLLYWOOD FL 33019				83				

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.

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City

SIGNATURE	Signature, typed or printed nan-e of registered agent and title if applic	cable. (NOTE.	Registered Agent signature require			
12.	OFFICERS AND DIRECTO	ORS .	13.	ADDITIONS/CHANGES TO OFFICERS #	ND DIRECTO	
TITLE	ST	☐ DELETE	1.1 TITLE		Change	☐ Addition
NAME	JAMES, MICHELLE BURKE		1.2 NAME			
STREET ADDRES S	1201 S. OCEAN DR, 25045		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CITY-ST-ZIP			
TITLE	PV	☐ DELETE	2.1 TITLE		Change	Addition
NAME	BURKE, JAY		2.2 NAME			
STREET ADDRES S	1201 S OCEAN DRIVE		2.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		2 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			32 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	_		34 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	_		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5 1 TITLE		Change	Addition
NAME			52 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			
	<u> </u>		64 CITY-ST-ZIP			

14. I 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 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 attach nent with an address, with a lother like empowered.

Michelle Byrke-James 4/23/99

Zip Cc de

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FI.