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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G44902 (6) JLCNDC, INC Principal Place of Business Mailing Address % NICOLE DINA COURRAT % NICOLE DINA COURRAT 100 SOUTH PARK BLVD., #106 100 SOUTH PARK BLVD., #108 ST. AUGUSTINE FL 32086-5171 ST. AUGUSTINE FL 32086-5171 3a. Date of Last Report 3. Date Incorporated or Qualified 06/23/1983 04/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2297627 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Ζıp 8. This corporation has liability for intangible tax under s. 199.032, X Yes 24 29 30 Florida Statutes □ No 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name COURRAT, NICOLE DINA 100 SOUTHPARK BLVD., #106 82 Street Address (P.O. Box Number is Not Acceptable) ST. AUGUSTINE FL 32086 83 Zip Code 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. I am farmour with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typical or printed name of registered agent and tice if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE COURRAT, NICOLE D 1.2 NAME NAME 22 TARRAGONA COURT STRUET ACCORESS 1.3 STREET ADDRESS ST AUGUSTINE, FL 00000 CHY-S 1.4 CITY - ST - ZIP DELETE Change Addition THE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS $\mathbb{C}(\{t\in S^T\}, \mathcal{J}))$ 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change ___ Addition TITLE NAME 3.2 NAME STEEL ALOHESS 3.3 STREET ADDRESS 0111-81-2IP 3.4. CITY - ST - ZIP DELETE 4 1 YITLE Change Addition THEF NAME 4. 2 NAME STEEL CADORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP OTY-ST-ZP DELETE DIG 5.1 TITLE Change Addition NAME 5.2 NAME STEELT ALCORESS **5.3 STREET ADDRESS** 5.4 CITY - ST - ZIP CHY-Si-ZiF DELETE Change Addition THEF 6.1 TITLE NAME 6.2 NAME STREET ATMIRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP COTY - ST. 20F

14. I do hereby certily 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 attachment with an address.

SIGNATURE:

AND TYPED OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

ytima Phone #

R2E034 (9/96)

May 14 1997 8:00am

Secretary of State