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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G52838

(1)JAMES KELLY ENTERPRISES, INC. Principal Place of Business Mailing Address 1632 1/2 HARRISON ST. 1832 1/2 HARRISON STREET HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-6817 3. Date Incorporated or Qualified 3a. Date of Last Report 08/04/1983 01/29/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-2333698 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z\Psi$ 8. This corporation has liability for intangible tax under s. 199,032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KELLY, JAMES P. Name 1832 1/2 HARRISON ST. 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33020 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Son James P. Kerry 4-29.97 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TOLE KELLY, JAMES P. NAME 1.2 NAMI 1832 1/2 HARRISON ST. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 161UF NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CHY+ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 Lille Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - S1 - ZIP DELETE Change Addition TITLE 4.1 TILLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY+S1-ZIF DELETE TITLE 51100 Change Addition NAME 5.2, NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY - S1 - Z0² DELETE Change Addition TITLE 6.1 THE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CI Y - \$1 - ZIP

14. I do 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 attachment with an address.

SIGNATURE: 4

P. Kous

#4-29-97 954-9299940

FILED

May 13 1997 8:00am

Secretary of State