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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H30600

(1)

1. Corporation Name

REGINALD PETER JACKSON, P.A.



Principal Place of Business

8301 NW 35 STREET
CORAL SPRINGS FL 33065

Mailing Address

8301 NW 35 STREET
CORAL SPRINGS FL 33065-4533

3. Date Incorporated or Qualified

11/20/1984

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 953 UNIVERSITY DR

Suite, Apt. #, etc.

22

City & State

23 CORAL SPRINGS, FL

Zip

24 33071

Country

25 USA

2a. Mailing Address

26 953 UNIVERSITY DR

Suite, Apt. #, etc.

27

City & State

28 CORAL SPRINGS, FL

Zip

29 33071

Country

30 USA

4. FEI Number

59-2488289

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

JACKSON, REGINALD PETER
8301 NW 35 ST
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

REGINALD PETER JACKSON

82 Street Address (P.O. Box Number is Not Acceptable)

2215 CYPRESS ISLAND DR, #PH1

83

84 City

POMPANO BEACH

FL

85 Zip Code

33069

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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the registered agent and title if applicable

REGINALD PETER JACKSON

(NOTE: Registered Agent signature required when reinstating)

3/20/97

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JACKSON, REGINALD PETER
STREET ADDRESS 8301 NW 35 ST
CITY-ST-ZIP CORAL SPRINGS FL

DELETE

TITLE VS
NAME LEBRUN-JACKSON, D'ANN M.
STREET ADDRESS 8301 NW 35 ST
CITY-ST-ZIP CORAL SPRINGS FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

REGINALD PETER JACKSON 3/20/97 954-917-0592

CR2E034 (9/96)