

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1082

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

97 AUG 25 AM 11: 17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # H61280 (4)  
1. Corporation Name  
JEFF B. BECKER AND CO.

Principal Place of Business  
13451 SW 99 TERRACE  
MIAMI FL 33186

Mailing Address  
13451 SW 99 TERRACE  
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/11/1985	04/04/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		59-2572578	Not Applicable
24 Country		30 Country		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 owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

BECKER, JEFFREY B  
24 B. GOLF VILLAGE  
KEY LARGO FL 33037

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKER, JEFFREY B	1.2 NAME	100002278361--6
STREET ADDRESS	24 B. GOLF VILLAGE	1.3 STREET ADDRESS	-08/27/97--01058--008
CITY-ST-ZIP	KEY LARGO FL 33037	1.4 CITY-ST-ZIP	***165.00 ***165.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 REQUIRED

*Jeffrey B. Becker*

CR2E034 (4/97)

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Jeff B. Becker + Co.  
13451 SW 99 Terrace  
Miami, FL. 33186  
Aug. 19, 1997

Florida Dept. of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL. 32314  
Attn. Annual Reports

I am requesting a waiver on the late fee due to the fact that I just received your "second notice", but I never received the "first notice". If you will check my previous history you will see that I am prompt with my annual report payment, but this year the initial notice was not received.

Please find attached my check in the amount of \$165.00 to satisfy the financial requirements for the annual report and corporation supplemental fee. I am submitting this to you immediately after receiving your current notice.

I look forward to your favorable reply.

Sincerely, Jeff B. Becker, Pres.  
JEFF B. BECKER AND CO.