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

PROFIT CORPORATION ANNUAL REFORT

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED Mar 26 1998 8:00am Sacratory of State

DOCUMENT # H91646 (0) JAWIL, INC. Output The state of	
	ÁLL BIÐIÐ ÐIÐIÐ HÐÐS
Principal Place of Business Mailing Address	
732 NE 3RD ST 732 NE 3RD ST POMPANO BCH FL 33060 POMPANO BCH FL 33060	
DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	ļ
2. Principal Place of Business 2s. Mailing Address 4. FEI Number	Applied For
21 26 59-2615824	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 5.	5 Additional
22 27 Fee	Required
	00 Mey Be ed to Fees
Zip Country Zip Country 8. This corporation owes or has paid the current year	
24 25 29 30 Personal Property Tax due June 30. Yes	□ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
LARCHE, JR J Name Woodrow W. Cheshire	
2780 E OAKLANU PARK BLVD B2 Street Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33306 732 NE 3rd Street	
Pompano Beach, FL 33060	
84 City F1 85 Z	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	g its registered
office or registered agent, or both, in the State of Eprida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent. I am familiar with, and ageogt the obligations of, Spotion 607.0505, Florida Statutes.	as registered
SIGNATURE ////Cheshire, V. Pres. // Drub 16.	1998
Signature. by ed or profite rando of operation agent and unail applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	TOPE IN 12
TITLE P DELETE 1.1 TITLE Change	
NAME CHESHIRE, ANGIE 1.2 NAME	
STREET ADDRESS 732 NE 3 ST 1.3 STREET ADDRESS	Já
CITY-ST-ZIP POMPANO BEACH FL 1.4 CITY-ST-ZIP	
TITLE VST DELETE 2.1 TITLE Chang	ge □ Addition C
NAME CHESHIRE, W. W. 22 NAME	1
STREET ADDRESS 732 NE 3 ST CITY-ST-ZIP POMPANO BEACH FL 23 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP	1
CITY-ST-ZIP PUMPANU BEACH FL 2.4 CITY-ST-ZIP TITLE AST DELETE 3.1 TITLE Change	ge Addition
NAME CHESHIRE, JAMES 3.2 NAME	
STREET ADDRESS 247 BEAR RIDGE ROAD 3.3 STREET ADDRESS	j
CITY-ST-ZIP CLEVELAND GA 3.4.CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE Chang	ge 🔲 Addition
NAME 4 2 NAME	-
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STREET ADDRESS 4.3 STREET ADDRESS	
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CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change	ge Addition
CITY-ST-ZIP	
CITY_ST-ZIP	
A 4 CITY - ST - ZIP	
CITY-ST-ZIP	

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: