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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # J06136

(2)

| 1, Corporation | JS ENTERPRISES OF SOUT | HWEST FLORIDA, IN | C. | |) |
|--------------------------------|--|--|---|---|--|
| Principal Place | e of Business | Mailing Address | | 1 | HI OLDIA DIBIJ DIBIJ \$1014 DIGA DIBIJ \$807 |
| 1231 MARKET CIRCLE | | 321 GRANADA BLVD. | | | |
| UNIT 3 | | WARM MINERAL SPRINGS FL 34287-1212 | | | |
| PORT CHARLOT | TE FL 33953 | US | | 9 Data languaged of Cualific | d 3a. Date of Last Report |
| | | | | Date Incorporated or Qualified 03/24/1986 | 05/01/1996 |
| 2. Principal Place of Business | | 2a. Mailing Address | | | Applied For |
| 21 | | 26 1231 MAR | KET CIRCLE | NOT APPLICABLE | Not Applicable |
| Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 UNIT 3 | | 5. Certificate of Status Desired | Fee Required |
| City & State | | 28 PORT CHARLOTTE FLORIDA | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 PORT CHARL | OTTE FLORIZ | Trust Fund Contribution | Added to Fees |
| Zip | Country | 29 33953 | 30 CHARLOTT | 8. This corporation has liability for | or intangible tax under s. 199.032, |
| 24 | 25 9. Name and Address of Current | | 130 VHAKLOFT | Florida Statutes 10. Name and Address of New | |
| HACI | LINGER, SUSANNA | | 81 Name 1 | | · |
| | | | | RICHARD MOORE ddress (P.O. Box Number is Not Accep | |
| 1231 MARKET CIRCLE UNIT 3 | | | 82 Street A | 231 MARKET CIRI | table) |
| | CHARLOTTE FL 33953 | | 1831 | | A N |
| 1011 | Olympotite it access | | 4 | NIT 3 | The Table 1 |
| | | | 84 City $\mathcal{P}_{\mathbf{A}}$ | RT CHARLOTTE | FL 85 Zip Code 3.3963 |
| 11. Pursuant | to the provisions of Sections 607,0502 | and 607.1508, Florida Stati | ites, the above-named c | orporation submits this statement for the | o purpose of changing its registered |
| office or re | egistered agent, or both, in the State in familiar with, and accent the obliga | of Florida. Such change was tions of, Section 607,0505. F | authorized by the corpo forida Statutes. | orporation submits this statement for the oration's board of directors. I horeby acc | cept the appointment as registered |
| SIGNATURE | Tribus O Many | RICHARD | | 4 | 1/30/97 |
| SIGNATURE | | nt and title if applicable (NC | TE Registered Agent signature re | quired when reinstating) | D/M1 |
| 12. | OFFICERS AND | | 13. | | FICERS AND DIRECTORS IN 12 |
| TITLE | PD | ₩ DELETE | 1.1 TITLE | PO | Change Addition |
| NAME | MOORE, LILUAN | | 1.2 NAME | RICHARO MOORE | _ |
| STREET ADDRESS | 317 GRANADA BLV | | 1.3 STREET ADDRESS | 317 GRANADA BLUL | · · · · · · · · · · · · · · · · · · · |
| CITY-ST-ZIP | WARM MINERAL SPRG FL | ™ DELETE | 1.4 CHY-S1-7IP | WARM MINERAL SPI | RINGS FA. Change Addition |
| TITLE | AUUDE BIOTABD | DEL DELETE | 2111111 | RICHARD MOORE | |
| NAME | MOORE, RICHARD | | 22 NAME | 317 GRANADA BLU | D. |
| STREET ADDRESS | 321 GRANADA BLVD. WARM MINERAL SPRG. FL | | 2.3 STREET ADDRESS | Warm Miller . S | now by Ex |
| CITY-ST-ZIP TITLE | ST | DE DOLETE | 2 4 CITY - ST - ZIP 3.1 THUE | WARM MINERAL S | Change Addition |
| NAME | HASLINGER, SUSANNA | page trees. | | PICHARD MOORE | e orango i rosmon |
| STREET ADDRESS | 321 GRANADA BLVD. | | 3.3 STREET ADDRESS | 317 GRANADA BLVD. | |
| CITY-ST-ZIP | WARM MINERAL SPRG. FL | | 3.4 CITY-S1-ZIP | WARM MINERAL SP | RINAS FA |
| TITLE | A T T TO A TAX TAX TAX TAX TO A TAX TAX TAX TAX TAX TAX TAX TAX TAX T | DELETE | 4.1 TOLE | KURULLIABING SE | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZiP | | |
| TITLE | | ☐ DETE1£ | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY - \$1 - 7IP | | |
| TITLE | | DELETE | 6.1 THE | | Change Addition |
| NAME | | | G.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | and portify that the information are all a | with this diline shape and are | 6.4 CITY - ST - ZIP | ted in Castion 110 07/0V/3 Flacial Ct-1 | ton I further english that the |
| informatio I am an oi | in indicated on this annual report or su | applemental annual report is the receiver or trusted empo | True and accurate and t wered to execute this re | ited in Section 119.07(3)(i), Florida Stati hat my signature shall have the same le port as required by Chapter 607, Florida 1907, Florida | gal effect as if made under eath; that |

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4/30/94

941-624-3242

FILED

May 15 1997 8:00am

Secretary of State