## 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 # .116881

1	MENT # <b>J1688</b> : IS BUILDERS, INC.	1 (1)		 		
Principal Plac	ce of Business	Mailing Address			BI IKOT OTOK DIBIK OTOK BIBIT DIBIK OTOK 1981	
% JESSE WATKINS 688 RIVER RD. ORANGE PARK FL 32073		% JESSE WATKINS 688 RIVER RD. ORANGE PARK FL 32073-3139				
				3. Date Incorporated or Quali 05/27/1986	fied 3a. Date of Last Report 08/02/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite Apt	# ote	Suite, Apt. #, etc.	<del></del>	59-2711384	Not Applicable \$8.75 Additional	
22 27		<b></b>		5. Certificate of Status Desire	d Fee Required	
City & State		City & State	City & State		ng \$5.00 May Be Added to Fees	
/(p)	Country 25	Zip 29	Country 30	Trust Fund Contribution  8. This corporation has liabilit Florida Statutes	y for intangible tax under s. 199.032,	
[	9. Name and Address of Curi			10. Name and Address of Ne		
WA1	TKINS, JESSE		81 Nam	ne		
688 RIVER RD. ORANGE PARK FL 32073			82 Stree	et Address (P.O. Box Number is Not Acc	odress (P.O. Box Number is Not Acceptable)	
			83			
			84 City		FL 85 Zip Code	
office or agent. I a SIGNATURE	Signature type of or primed many of registered			ed corporation submits this statement for orporation's board of directors. I hereby a lure required when reinstating!  ADDITIONS/CHANGES TO 0	DATE  DATE  DEFICERS AND DIRECTORS IN 12	
TIDLE	DP	DELETE	1.1 TITLE		Change Addition	
NAME	WATKINS, JESSE		1.2 NAME	}		
STREET ADDRESS	1		1.3 STREET ADDRES	os		
DITY ST ZIE	ORANGE PARK FL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME	WATKINS, AU VERNE		22 NAME	[		
STREET ADDRESS	AGO DILETO DO		2.3 STREET ADDRES	ss		
CHY ST ZiP	ORANGE PARK FL		2. 4 C(TY-ST-Z)P			
Diffe		DELETE	3.1 TITLE		Change Addition	
NAME STREET ADORESS			3.2 NAME 3.3 STREET ADDRES	22		
City St 2th			3.4. CITY-ST-ZIP	~		
THE		DELETE	4.1 TITLE		Change Addition	
NAM			4. 2 NAME			
STEEL * ADDRESS			4.3 STREET ADDRES	SS		
101Y ST 70P		DELETE	4.4 City-St-Zip 5.1 Title		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRES	ss		
COLY S1-7IP		DELETE	5.4 CITY-ST-2IP		Change Addition	
THEE NAME			6.1 TITLE 6.2 NAME		FT CHANGE FT VOORBOL	
STREET ACOURTS			6.3 STREET ADDRES	38		
CIEY ST-ZIP			6.4 CITY-ST-ZIP	<u></u>		

14. I do hereby certify that the information supplied with this filling 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 if an 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 planged, or on an attachment with an address.

SIGNATURE:

ATTURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Spil 11 /997 (904)26

**FILED** 

Apr 15 1997 8:00am

Secretary of State

R2E034 (9/96)