

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra S. Worthington  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 JUL -2 AM 8:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # J37500 (2)  
1. Corporation Name  
JOADS THREE, INC.

Principal Place of Business  
13143 DOUBLETREE CIRCLE  
WELLINGTON FL 33414-4038

Mailing Address  
13143 DOUBLETREE CIRCLE  
WELLINGTON FL 33414-4038

3. Date Incorporated or Qualified  
10/13/1986

3a. Date of Last Report  
06/10/1996

4. FEI Number  
59-2809542

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fees 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

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent  
A. ELROD, ROXANNE BETH  
230 ROYAL PALM WAY  
SUITE 424  
PALM BEACH FL 33480  
SORRY FOR  
LATE FILING  
MISPLACED DUE  
TO STATE OF BUSINESS  
BY LAWYER

10. Name and Address of New Registered Agent  
81 Name ALAN BERNSTEIN  
82 Street Address (P.O. Box Number is Not Acceptable)  
4869 OKEECHOBEE BLVD  
83  
84 City WPB FL 85 Zip Code 33417

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 ALAN BERNSTEIN DATE 6/24/97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PSD	FEINSILVER, RODGER L.	13143 DOUBLE TREE CIRCLE	WELLINGTON FL	<input type="checkbox"/>
VTD	FEINSILVER, RHONA L.	13143 DOUBLE TREE CIRCLE	WELLINGTON FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		300002233833--6	-07/09/97--01073--002		
		***165.00	***165.00		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition

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 or changed, or on an attachment with an address.

CR2E034 (9/96)