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

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

J68640

(8)

DOCUMENT # JAYHILL ENTERPRISES, INC. Principal Place of Business Mailing Address **% DOUGLAS H. SPITLER** % DOUGLAS H. SPITLER 13770 SW 73 ST 13770 SW 73 ST MIAMI FL 33183-3124 MIAMI FL 33183 3a. Date of Last Report US 3. Date Incorporated or Qualified 04/21/1987 01/23/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 342 FITZHUGH 342 FITZKUGH RD. 59-2785292 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be WINTER PARK, FL WINTER Trust Fund Contribution Added to Fees 23 28 Country This corporation has liability for intangible tax under s. 199.032, UŠ 32792 Yes X No Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SPITLER, DOUGLAS H. 13770 SW 73 ST **MIAMI FL 33183** 83 WINTER 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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 appointment as registered agent. SPITLER DOUGLAS SIGNATURE Registered Agent signatu ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DPVT ☐ DELETE 1.1 TITLE SPITLER, DOUGLAS H. NAME 1.2 NAME ZHUCH RD 13770 SW 73 ST 1.3 STREET ADDRESS STREET ADDRESS miami fl CITY ST ZIF 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE G SPITLER KRISTEN NAME 2.2 NAME LER STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE 3 1 TITLE Addition TITLE 32 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 51 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 6.1 TITLE THILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 64 CITY-ST-ZiP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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. DOUGLAS

**FILED** 

Jan 22 1997 8:00am

Secretary of State

CR2E034