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		DIVISION OF CORPORATIONS			_ Secretary of State		
	MENT # J8 Enterprises, inc		(3)			r haanna ähäi sakki siani akkii aansi kaki	n 2184 6184 6184 6181 8181 8181	ı Biğli tüğli
Principal Place of Business			Mailing Address			a seatte bios inch isati date meter inc	a makan mebet dibin baban maha	ALALL COST
% BETTE MCJUNKIN 55 PARK LANE DEBARY FL 32713		55	% BETTE MCJUNKIN 55 PARK LANE DEBARY FL 32713-2825					
DEBART PL 32	ris	ve	DART FL 32713-2023			3. Date Incorporated or Qualified	3a. Date of Last R	eport
3 Drice cal D	lace of Business	20	Mailing Address			06/30/1987 4. FEI Number	04/17/1996	- Lind Co.
21 Principal F	lace of business	26	walling Address			59-2825570		oplied For ot Applicable
Suite, Apt.	#, etc	[20]	Suite, Apt. #, etc.	······································			\$8.75	
22		27				5- Certificate of Status Desired	Fee Re	equired
City & State	e	-	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
23	Country	28	Zip	Countr	- 	8. This corporation has liability for		
24	25	29		30	•	· _ · _ · _ · · · ·	Yes No	. 188.032,
	9. Name and Addres	s of Current Regis	tered Agent		,	10. Name and Address of New Re	egistered Agent	
MCJ	UNKIN, BETTE		81	Name				
55 PARK LANE			82 Street Add			dress (P.O. Box Number is Not Acceptal	ble)	
DEB	ARY FL 32713			B3				
				ľ	<u> </u>			
				84	City		FL 85 Zip	Code
l oflice or r	egistered agent, or both, m familiar with, and acce Signature, board or printed name.	in the State of Floric pt the obligations of of registered agent and little	da. Such change was a f, Section 607.0505, Fk	authorized b orida Statute	y the corpora s.	poration submits this statement for the ation's board of directors. It hereby accentions the properties the statement for the properties that the properties the properties that the prope	pt the appointment as	registered
12.		HCERS AND DIREC		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	PVT		☐ DELETÉ	1.1 TITLE			Change	Addition
NAME STREET ADDRESS	MCJUNKIN, ALTON. 55 Park Lane.			1.2 NAME	T ADDRESS			
C-TY - ST - ZIP	DEBARY FL			1.4 CITY-	1			
TITLE	DEDON'T FE		☐ DELET E	2.1 TITLE	21-24		Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREE	T ADDRESS			
CITY-ST-ZIP	,		T and the	2. 4 CITY	\$1-ZIP			
1111.6			DELETE .	3,1 TITLE			Change	Addition
NAME CENTLE ADDRESS				3.2 NAME	T ADDRESS			
STREET ADDRESS				3.4. CITY	- 1			
Title			☐ DELETE	4.1 TITLE	J. 411		Change	Addition
NAME				4. 2 NAMI				
STREET ADDRESS				4.3 STREE	T ADDRESS			
CHY-ST-7IP				4.4 CITY-	ST-ZIP	······································		
THILE			☐ DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS					T AODRESS			
TITLE			☐ DELETE	5.4 CITY- 6.1 TITLE	51 · ZIP		Change	Addition
NAMÉ .				6.2 NAME				- 100.11011
STREET ADDRESS					T ADDRESS			
מול ום ענות				C A CITY				

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. Torida Statutes; and that my name appears in Block 12 or Block 13.11 changed, or on an attachment with an address.

SIGNATURE:

FILED

Apr 28 1997 8:00am

Secretary of State