

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J88101 (7)
1. Corporation Name
JAY MITCHELL ENTERPRISES, INC.



Principal Place of Business % MITCHELL J. SMALL 1321 S POWERLINE RD. POMPANO BCH. FL 33069	Mailing Address % MITCHELL J. SMALL 1321 S POWERLINE RD. POMPANO BCH. FL 33069
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 18029 SAMBA Lane Suite, Apt. #, etc. 22 City & State 23 Boca Raton, FL Zip 24 33496		2a. Mailing Address 26 18029 SAMBA Lane Suite, Apt. #, etc. 27 City & State 28 Boca Raton, FL Zip 29 33496		3. Date Incorporated or Qualified 08/18/1987	
4. FEI Number 59-2841596		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent SMALL, MITCHELL J. 1321 S POWERLINE RD. POMPANO BCH. FL 33069				10. Name and Address of New Registered Agent 81 Name Mitchell J. Small 82 Street Address (P.O. Box Number is Not Acceptable) 18029 SAMBA Lane 83 84 City Boca Raton FL 85 Zip Code 33496			
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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 *Mitchell J. Small*, N.P. Mitchell J. Small **4/27/98**
Signature typed or printed name of registered agent and if it applies also (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SMALL, MITCHELL J.		1.2 NAME Mitchell Small	
STREET ADDRESS 1321 S. POWERLINE ROAD		1.3 STREET ADDRESS 18029 SAMBA Lane	
CITY-ST-ZIP POMPANO BCH FL		1.4 CITY-ST-ZIP Boca Raton, FL 33496	
TITLE Secretary	<input checked="" type="checkbox"/> DELETE	2.1 TITLE P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME MORIS SMALL		2.2 NAME NANCY MACKS-SMALL	
STREET ADDRESS 5021 WOODHARD AVE		2.3 STREET ADDRESS 18029 SAMBA Lane	
CITY-ST-ZIP TAMPA, FL 33317		2.4 CITY-ST-ZIP Boca Raton, FL 33496	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME Mitchell J. Small	
STREET ADDRESS		3.3 STREET ADDRESS 18029 SAMBA Lane	
CITY-ST-ZIP		3.4 CITY-ST-ZIP Boca Raton, FL 33496	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: *Mitchell J. Small* **4/27/98** 60882-5772

CF2E034 (10/97)