

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

APPROVED
SECRETARY OF STATE

DOCUMENT # **J91015** (4)
JODAWON CORPORATION

COMM - 111010
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200A SARASOTA QUAY SARASOTA FL 34236 US		200A SARASOTA QUAY SARASOTA FL 34236 US		3. Date of Incorporation (or Reincorporation) 09/04/1987		39. Date of Last Report 05/24/1994	
21. NONE		26. 4908 LINSEY CT		4. FID Number 59-2840841		Apply Fee Not Applicable	
22.		27.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23.		28. SARASOTA FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24.		29. 34243		30. MANATEE		8. This corporation has liability for enterprise tax under 5-109(1)(2), Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RIECK, JOAN D 476 MEADOW LARK DR. SARASOTA FL 34236				B1. Name			
				B2. Street Address, P.O. Box Number, and Apartment 4908 LINSEY CT			
				B3.			
				B4. City SARASOTA FL B5. Zip Code 34243			

11. I, undersigned, being duly sworn, depose and say that the Florida Statutes, the officer named corporation submits this statement for the purpose of changing its registered office to the State of Florida. I hereby certify that the 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 the Florida Statutes.

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D RIECK, CARL E JR 476 MEADOW LARK DR. SARASOTA FL	NAME	X Change <input type="checkbox"/> Add <input type="checkbox"/> RIECK, CARL E JR 4908 LINSEY CT SARASOTA FL 34243
NAME	D RIECK, JOAN D 476 MEADOW LARK DR. SARASOTA FL	NAME	X Change <input type="checkbox"/> Add <input type="checkbox"/> RIECK, JOAN D 4908 LINSEY CT SARASOTA FL 34243
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/>
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NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/>

14. I, undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, for the reasons stated in Section 5-109(1)(2), Florida Statutes. I further certify that the information included in this report and report of supplemental annual reports, true and correct, and that the signatures of all persons named herein are the true and correct signatures of each person named herein. I am familiar with and accept the obligations of the Florida Statutes. I hereby certify that the information included in this report is true and correct.

SIGNATURE: *Joan D. Rieck* President
 JOAN D. RIECK
 4/26/95 813-359-2839
 PRESIDENT