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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # K04162

(9)

JAW 1	ROCK, INC.							
Principal Place	of Business	Mailing Address					TO BURNE MODEL	01411 01611 1861
11330 ROYAL PALM BLVD 9754 SARATOGA PK CT CORAL SPRINGS FL 33065 BOCA RATON FL 33428								
					3. Date Incorporated or Qualified		of Last Re	•
					11/25/1987	0	<u> 1/17/199</u>	
2. Principal Pla 1	ce of Business	2a. Mailing Address			4. FEI Number		├-	Applied For
Suite, Ap:. #	elc	Suite, Apt. #, etc.	 		65-0020894			Not Applicable Additional
2	, ••••	27			5. Certificate of Status Desired			Required
City & State	78-10-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	City & State			6. Election Campaign Financing			May Be
3		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Coun	try	8. This corporation has liability for		x under s	199.032,
4	25	29 29 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	30		Florida Statutes X Ye			
	9. Name and Address of Curre	nt Registered Agent		B1 Name	10. Name and Address of New	Hegistered /	Agent	
DDAVA	HOWADD							
	HOWARD RATOGA PK. CT.		1	Street Add	dress (P.O. Box Number is Not Accepta	able)		
	ATON FL 33428		1	B3				
DOUA N	KTOR FL 33420							
			11	B4 City		FL	85 Zr	Code
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the abov	e-named corpo	pration submits this statement for the pu	urpose of cha	anging its re	agistered office
or registere familiar witt SIGNATURE	od agent, or both, in the State of Flor n, and accept the obligations of, Sec Signature, typed or printed name of registered agen	rida. Such change was author otion 607.0505, Florida Statute nt and title 1 applicable (f	ized by the co es.	e-named corporporation's boa	ard of directors. I hereby accept the app	urpose of cha pointment as	anging its re registered	agent. I am
or registere familiar with SIGNATURE	od agent, or both, in the State of Flor n, and accept the obligations of, Sec Signature, typed or printed name of registered agen	rida. Such change was author tion 607.0505, Florida Statute it and title (applicable) ND DIRECTORS	ized by the co es. NOTE: Registered A	orporation's boa	ard of directors. I hereby accept the app	pointment as DATE FICERS AND	registered DIRECTO	agent. I am
or registere familiar with SIGNATURE 12.	sol agent, or both, in the State of Flor n, and accept the obligations of, Sec Signature, typod or printed name of registered agen OFFICERS AN	rida. Such change was author otion 607.0505, Florida Statute nt and title 1 applicable (f	VOTE: Registered A	orporation's boa	ard of directors. I hereby accept the application of directors and the application of the	pointment as DATE FICERS AND	registered	agent. I am
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SIGNATURE: Lester Bravo Dexter Bravo 4/19/96 (305)221-1097
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date:

Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the printed Name of Signing Officer Or Director Description of the Printed Name of Signing Officer Or Director Description Or Di

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