

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # DUST BUSTERS OF JAX, INC. 1. Corporation Name			
K17051			
Principal Place of Business		Mailing Address	
12935 Deep Lagoon Pl E		Jacksonville FL 32246	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified	
21 AS Above		59-2875167	
22 Suite, Apt. #, etc.		Applied For	
23 City & State		Not Applicable	
24 Zip		25 Country	
26 AS Above		27 Suite, Apt. #, etc.	
28 City & State		29 Zip	
30 Country		31 FEI Number	
32 This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		33 Certificate of Status Desired	
34 Yes		35 No	
36 Election Campaign Financing Trust Fund Contribution		37 \$8.75 Additional Fee Required	
38 \$5.00 May Be Added to Fees		39	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Janet Perry		81 Name	
12935 Deep Lagoon Pl E		82 Street Address (P.O. Box Number is Not Acceptable)	
Jax, FL 32246		83	
84 City		85 Zip Code	
FL		9-1-98	
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: Janet C. Perry DATE: 9-1-98			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			
000002642880			
-09/18/98--01019--004			
***150.00			
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: Janet C. Perry 9-1-98			

CR2E034 (5/98)

MEMO

(2)

9-1-98

Dear Sir or Madam,

Thank you for sending me the form. As I explained to the lady who took my call I did not receive my notice in the mail. We have had alot of mail missing in our vicinity. I appreciate your helpfulness in this matter.

Yours truly,
Janet C. Perry