

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K62588**

(4)

1. Corporation Name

J & S CONSULTANTS, INC.

Principal Place of Business

**% JAGUSZTYN & JAGUSZTYN, PA
701 E. COMMERCIAL BLVD. #200
FT. LAUDERDALE FL 33334
US**

Mailing Address

**% JAGUSZTYN & JAGUSZTYN, PA
701 E. COMMERCIAL BLVD. #200
FT. LAUDERDALE FL 33334
US**

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

**JACKSON, JERRY L.
5100 NW 33RD AVE., SUITE 240
FT. LAUDERDALE FL 33309**

11. Pursuant to the provisions of Sections 607.06, 607.07 and 607.12, Florida Statutes, I, the undersigned, being a duly qualified officer or registered agent, or both, in the State of Florida, do hereby change the registered agent of the corporation named above, and I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.06, 607.07 and 607.12, Florida Statutes.

SIGNATURE: **X JERRY L. JACKSON**

X Jerry L. Jackson

X 3-29-96

12. OFFICERS AND DIRECTORS

12.1	NAME	D JACKSON, JERRY L.	☐ DELETE
12.2	STREET ADDRESS	100 S VILLAGE DR	
12.3	CITY-STATE-ZIP	CENTERVILLE OH	
12.4	NAME	D HAWK, SHARON L.	☐ DELETE
12.5	STREET ADDRESS	100 S VILLAGE DR	
12.6	CITY-STATE-ZIP	CENTERVILLE OH	
12.7	NAME		☐ DELETE
12.8	STREET ADDRESS		
12.9	CITY-STATE-ZIP		
12.10	NAME		☐ DELETE
12.11	STREET ADDRESS		
12.12	CITY-STATE-ZIP		
12.13	NAME		☐ DELETE
12.14	STREET ADDRESS		
12.15	CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	NAME		☐ Change ☐ Addition
13.2	STREET ADDRESS		
13.3	CITY-STATE-ZIP		
13.4	NAME		☐ Change ☐ Addition
13.5	STREET ADDRESS		
13.6	CITY-STATE-ZIP		
13.7	NAME		☐ Change ☐ Addition
13.8	STREET ADDRESS		
13.9	CITY-STATE-ZIP		
13.10	NAME		☐ Change ☐ Addition
13.11	STREET ADDRESS		
13.12	CITY-STATE-ZIP		

14. I do hereby certify that the information supplied by me, the undersigned, is true and correct, and that the information is true and correct as of the date of filing of this report. I understand the importance of this information and that my name appears in Block 12 or Block 13 of this report, and that my name appears in Block 12 or Block 13 of this report, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: **X Jerry L. Jackson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 3-29-96

X 513-438-1026

CR2E034 (12/95)