

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

FILED
May 08 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 # K 66880			
1. Corporation Name J.P. ACCOUNTING SERVICE, INC.			
Principal Place of Business 6601 COLONIAL DR. MARGATE, FL 33063		Mailing Address 6601 COLONIAL DR. MARGATE, FL 33063	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	
3. Date Incorporated or Qualified 02/20/1989		3a. Date of Last Report 4/97	
4. FEI Number 65-0104208		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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent PIELOCH, JOSEPH 6601 COLONIAL DR. MARGATE, FL 33063		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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 Joseph Pieloch DATE 4-27-98			
12. OFFICERS AND DIRECTORS 12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP DPT PIELOCH JOSEPH 6601 COLONIAL DR. MARGATE, FL 33063		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP 13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY - ST - ZIP 13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY - ST - ZIP 13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY - ST - ZIP 13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY - ST - ZIP 13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY - ST - ZIP 13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY - ST - ZIP 13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY - ST - ZIP 13.33 TITLE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY - ST - ZIP 13.37 TITLE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY - ST - ZIP 13.41 TITLE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY - ST - ZIP 13.45 TITLE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY - ST - ZIP 13.49 TITLE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY - ST - ZIP 13.53 TITLE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY - ST - ZIP 13.57 TITLE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY - ST - ZIP 13.61 TITLE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY - ST - ZIP 13.65 TITLE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY - ST - ZIP 13.69 TITLE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY - ST - ZIP 13.73 TITLE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY - ST - ZIP 13.77 TITLE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY - ST - ZIP 13.81 TITLE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY - ST - ZIP 13.85 TITLE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY - ST - ZIP 13.89 TITLE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY - ST - ZIP 13.93 TITLE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY - ST - ZIP 13.97 TITLE 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY - ST - ZIP	
14. I do 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: Joseph Pieloch JOSEPH PIELOCH DATE: 4-27-98 DAYTIME PHONE #: 954-973-1760			

CR2E034 (9/95)