SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT** COF CORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # K94738 (7) J & B ENTERPRISES, (JA) INC. Principal Place of Business Mailing Address 4001 PEMBROKE ROAD CLARKE c/o JONATHAN HOLLYWOOD, FL 33021 4001 PEMBROKE ROAD 3a. Date of Last Report FL 33021 3. Date Incorporated or Qualified HOLLYWOOD, 7/14/1995 05/15/1989 Applied For 4. FE1 Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0106521 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc Certificate of Status Desired X Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangitile tax under s= 199 032. Florida Statutes Yes X No Country Country Żφ 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) CLARKE, JONATHAN C. 82 4001 PEMBROKE ROAD 83 33021 HOLLYWOOD, City FL 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. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent's gnature registed when reics along) Signature, typich or printed packer of registered agest and fix in applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE PD CLARKE, JONATHAN 1.2 NAME NAME 13 STREET ADDRESS 4001 PEMBROKE ROAD STREET ADDRESS HOLLYWOOD, FL 33021 14 CHY S1-ZP CITY - ST-ZIP Change Addition DELETE 21 TITLE TITLE NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE $3.1\,TIT_{k}E$ TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 City - \$1 - Zip CITY - ST - ZIP Change Addition DELETE 41111√€ TITLE 4.2 NAME NAMÉ 4 3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE TITLE 5.2 NAMS 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - SI - 7IP 90000189594\$ Add sich -07/17/96--01020--001 CITY-ST-2IP DELE16 61TITLE TITLE 6.2 NAME NAME 63 STHEET ADDRESS ***233.75 STREET ADDRESS 6408Y-ST-ZIF 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 further certify that the information indicated on this annual report or suppliedental 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 injector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or florida Statutes and address

CHING OFFICER OR DIRECTOR

SIGNATURE: