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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

1 20122

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Principal Place	INESS COMPUTER PRODU e of Business	JCTS, INC. Mailing Address 1500 BEVILLE RO.	AD.					
STE 203		STE 203						
DAYTONA US	BEACH FL 32114	DAYTONA BEACH	FL 32114		3. Date Incorporated or Qual	ified 3s D	ate of Last F	Ponort
03		US			10/02/1989	54 . D	04/24/	·
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	Applied For
21 26		26			65-0151878	OF 04F4070		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desire	м п	\$8.7	5 Additional
22		27			5. Cortindate of States Desire	xa 🔲		Required
City & State	е	City & State			6. Election Campaign Finance	ing	\$5.0	00 May Be
<i>Z</i> ip	Country	28 Zip		unto.	Trust Fund Contribution			ed to Fees
24	25	29	30	intry	8. This corporation has liabilit	ty for intangible] Yes ∏ No	tax under s	199.032,
,	9. Name and Address of Currer		1301		10. Name and Address of N		d Agent	
				81 Name		ion riogistore	o Agent	
MARO	OVTICH, EVELYN			OO Chroni A	(D.O. P. M.)			
2653 SLOW FLIGHT DRIVE				82 Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
	ONA BEACH, 32124			83				
	• • • •			84 City				
				-		F		ip Code
11. Pursuant t	to the provisions of Sections 607,0502	and 607.1508, Florida Statu	des, the abo	we-named corr	poration submits this statement for the	ro nuronno of c	haroino ite	registered office
			L. Al-	VO HAITIOU CUIT	bolation applicating statement for its	e barbase or c	and igning its	registered unice
familiar wit	th and accept the obligations of Sect	da. Such change was authori ion 607.0505, Florida Statute	ized by the d	corporation's bo	poration submits this statement for the poard of directors. I hereby accept the	appointment	as registered	d agent. I am
familiar wit	th and accept the obligations of sec	Doniell	(No	Chan	16e)	appointment 4/12	as registered	d agent. I am
SIGNATURE	Supray 16 1 food of full hame of registered and	and the inarrance of the control of	No. Registered	Chan	(CE)	4/12 DATE	196	
SIGNATURE	Syra Milyado de full reme o registres de mo	D DIRECTORS	No Registered 13.	Agent signature requ	16e)	4/12 DATE	96 ND DIRECTO	
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SIGNATURE 12. TITLE NAME STREET ADDRESS	OFFICERS AN PT MAROVITCH, MARK 2853 SLOW FLIGHT DR.	D DIRECTORS	13. 1.1 Ti 1.2 N/ 1.3 ST	Agent signature required. TLE AME REET ADDRESS	(CE)	4/12 DATE	96 ND DIRECTO	
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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 it changed, or on an attachment with an address.

SIGNATURE: