SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** L51550 (6)JUMP-START SERVICE, INC. Mailing Address Principal Place of Business 1512 S.W. 24TH ST. 1512 S.W. 24TH ST. FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315 3a. Date of Last Report 3. Date Incorporated or Qualified 02/15/1990 02/14/1995 Applied For FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 62-1213305 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. # etc 5. Certificate of Status Desired Fee Required 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 intangible tax under s. 199.032, Country Country Zip Zip Yes 🔀 No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KING, BILLIE W. Street Address (P.O. Box Number is Not Acceptable) 82 1512 SW 24TH ST FT LAUDERDALE FL 33315 83 Zip Code 84 City ed corporation submits this statement for the purpose of changing its registered Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above ratoffice or registered agent, or both, in the State of Florida. Such change was authorized by the agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Scattley. Billia W. King SIGNATURE. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8)OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE 1.2 NAME KING, BILLIE W. NAME 1512 SW 24TH ST. 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 14 CITY ST-ZIP CRY-ST-ZIP Change Addition DELETE 21 TIFLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CHTY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3 I TILE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 C(TY - \$1 - Z)P CITY-ST-2IP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STRECT ADDRESS STREET ADDRESS 5 4 CHY - \$1 - ZIP CITY - S1 - ZIP Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address 6.4 City - ST- Zift

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