2nd and

2nd and File on or before Sept. 30, 1998 or Limited Liability Company will be FINAL NOTICE: dissolved. If dissolved, minimum amount due to reinstate: \$688.75

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE



FILED SECRETARY OF STATE

ANNUAL REPORT 1998			Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		DIVISION OF CORPORATIONS				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee						\UG -	-3 PM 3	}: 05	
and Mailing Ad									
JPB PROPERTIES, L.C. JOHN POWERS BOX 726 RIFLE CO 81650						1a. Principal Place of Business Address 90130 OLD HIGHWAY TAVERNIER FL 33070			
2. Principal Place of Business 2a. Ma			iling Address		3. Date Organized or Qu	alified	3a. State o	of Formation	
Suite, Apt. #, etc.			t. #, etc.	03/16/1995					
City & State			ate	Applied For S8-2169885 Not Applicable					
	Country	Zip		Country	5. Date of Last Report		6. Certifica	le of Status Desired	
	1				03/06/1997			ual fee Hequired	
7. Name and Address of Current Registered Ag					. Name and Address of Nev	v Regis	tered Agent	Office	
HERSHOFF, JAY 90130 OLD HIGHWAY TAVERNIER FL 33070						Box Number is Not Acceptable)			
				City FL Zip Code				MA	
ered of fice or regi	istered agent, or both, i	n the State of Flor	Florida Statutes, ida. Such change	the above-named limite was authorized by affirm	ed liability company submits the native vote of a majority of the n	nis state nember	ement for the s. I hereby ac	purpose of changing cept the appointment	
SIGNATURE								_	
10. Title Managing Members/Managers				Business Street Address			City, State and Zip Code		
GRM POWERS, JOHN GRM BABICKA, JAROMIR					RIFLE CO HAWORTH NJ				
					6000	10:3 08/0 ****	2 611 7/980 588,75	0167 1089020 ****588.75	
	JPB PROJOHN POBOX 726 RIFLE OF	A FEE Annual Report \$100.00 + 100.00 +	A FEE Annual Report \$100.00 + \$88.75 Corporation B.75 Make Check Payable To: FLOR B.75 Make Check Payable To: FLOR	ANNUAL REPORT 1998 Secreta DIVISION OF Secretary DIVI	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee B.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE and Mailing Address and Mailing Address and Mailing Address and Mailing Address DOCUMENT # L95000000231 JPB PROPERTIES, L.C. JOHN POWERS BOX 726 RIFLE CO 81650 pal Place of Business 2a. Mailing Address bit. #, etc. City & State Country 7. Name and Address of Current Registered Agent Name CHOFF, JAY O OID HIGHWAY SRNJER FL 33070 Suite, Apt. #, etc. City Suite,	Secretary of State DIVISION OF CORPORATIONS 3.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 2 and Mailing Address and Mailing Address BOX 726 RIFLE CO 81650 Pal Place of Business 2a. Mailing Address BOX 726 RIFLE CO 81650 Pal Place of Business 2a. Mailing Address 3. Date Organized or Organized organized or Organized or Organized orga	Secretary of State DIVISION OF CORPORATIONS 3 FEE Annual Report \$100.00 + \$60.76 Corporation Supplemental Fee + \$400.00 Late Fee 3.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1a. Principal Place of Business 1b. Principal Place of Business DOCUMENT # L95000000231 JPB PROPERTIES, L.C. JOHN POWERS BOX 726 RIFLE CO 81650 pai Place of Business 2a. Mailing Address Suite, Apt. #, etc. City & State Country Typ Country Typ Country Typ Country Typ To Name and Address of Current Registered Agent SHOFF, JAY O O.J.D HIGHWAY RINJER FL 33070 Suite, Apt. #, etc. City FL sant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this state red office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the member red agent, and accept the obligations. JRE Managing Members/Managers Business Street Address City POWERS, JOHN 1046 STATE HWY. 325 RIFLE HAWORT	Secretary of State DIVISION OF CORPORATIONS 3 FEE Annual Report \$100.00 + \$58.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1a. Principal Place of Business Address Incided Lakylin'y Company DOCUMENT # L95000000231 JPB PROPERTIES, L.C. JOHN POWERS BOX 726 RIFLE CO 81650 2a. Mailing Address Suite, Apt. #, etc. Country 7a. Name and Address of Current Registered Agent Country 7. Name and Address of Current Registered Agent SHOFF, JAY COUNTRY Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Suite, Apt. #, etc. City Lamt to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this statement for the rect office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Their by according and accept the obligations. DATE Managing Members/Managers Business Street Address City, State and Zi POWERS, JOHN 10.46 STATE HWY. 325 RIFLE CO	

11. Ido 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trust the empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.