## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCL	JME	NT #

• Corporation	MENT # M163	309	(0	))				
НОТІ	EL GROUP JACKSONVILLE	E, INC.				)	<b>1</b>   <b>18</b>   <b>18</b>   11 <b>  1</b>   12   13   14   15   15   15   15   15   15   15	( <b>8</b> (8)) \$1511 \$152 \$150
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Principal Place			ling Address			a Lunkrader von Hinelt der All Hill 91	1880 1081 01040 0101	t minst other broll broll (0)
B25 S. BA MIAMI FL: US	DN.LAURANS A. YSHORE DR., S-1643 33131		% HENDELSON, Li 825 S. BAYSHORE MIAMI FL 33131 US			Date Incorporated or Qualified	<b>2</b>	
2 Dringing Di	ace of Business					06/05/1985	3a. Date of 05	Last Report <b>/01/1995</b>
21 Principal Pia	ace or Business	11	Mailing Address			4. FEI Number	-4	Applied For
Suite, Apt.	#, etc.	26	Suite, Apt. #, etc.			59-2596301		Not Applicable
22		27				5. Certificate of Status Desired		8.75 Additional Fee Required
City & State 23		28	Oity & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be
Zip	Country	F	îp	Countr	y	8. This corporation has liability for it	ntangible tax u	Added to Fees
24	25 9. Name and Address of Curre	29	rod Agort	30		Florida Statutes  Yes	[ No	
	o. Admir blid Address of Cuffel	iii negiste	reu Agent	81	Name	10. Name and Address of New R	egistered Age	ent
MENDE	ELSON, LAURANS A.			<u> </u>				
	BAYSHORE DR 1643			82	Street Add	lress (P.O. Box Number is Not Acceptabl	e)	
	FL 33131			83				
					-			
44.6				84				5 Zip Code
	the provisions of Soutions 202 Asoc	Land GAZ :	IFOR Florida Ctat.	the the above	<del></del>	~		
or registere	ed agent, or both, in the State of Flori	da Such e	hanna was authori:	ros, the above-	named corpor	ration submits this statement for the purp	oose of changir	na its registered office
	o the provisions of Sections 607.0502 ad agent, or both, in the State of Flori n, and accept the obligations of, Sect	da Such o tion 607.05	hange was authori; 05, Florida Statute:	zed by the corp s.	named corpoi oration's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	oose of changir introent as regi	ng its registered office istered agent. I am
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SIGNATURE:

SIGNATORE AND TYPES OR PHINTED HAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 (3-5) 374-1744 Declar (3-5) 374-1744