

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M52931 (6)

1. Corporation Name
JEFFREY BLISS & ASSOCIATES, INC.

Principal Place of Business 6100 HOLLYWOOD BLVD. SUITE 307 HOLLYWOOD FL 33024	Mailing Address 6100 HOLLYWOOD BLVD. SUITE 307 HOLLYWOOD FL 33024
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/29/1987	4. FEI Number 59-2820908	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 1305 University Dr. Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State Plantation FL	27 City & State
23 Zip 33324	28 Country
24 Country Broward	29 Zip 33324

9. Name and Address of Current Registered Agent
BLISS, JEFFREY, D
11093 TOPEKA PLACE
COOPER CITY FL 33026

10. Name and Address of New Registered Agent
81 Name Jeffrey D. Bliss
82 Street Address (P.O. Box Number is Not Acceptable)
83 City Plantation
84 State FL
85 Zip Code 33324

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Bliss, Jeffrey D.
NAME	BLISS, JEFFREY D.	1.2 NAME	10965 Whitehawk St.
STREET ADDRESS	11093 TOPEKA PLACE	1.3 STREET ADDRESS	Plantation, FL 33324
CITY-ST-ZIP	COOPER CITY FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	Secretary
NAME		2.2 NAME	Londa D. Bliss
STREET ADDRESS		2.3 STREET ADDRESS	10965 Whitehawk St.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Plantation, FL 33324
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  FILING REQUIRED

1/20/98 (954) 236-4800

Date Daytime Phone # 0138514

CR2E034 (10/97)