

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

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90084 038 \*\*\*150.00

03-04-1999

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M53917

1. Corporation Name  
JESSICA JOHNS' LEASING, INC.



Principal Place of Business  
920 BAMB I DR  
DESTIN FL 32541  
US

Mailing Address  
920 BAMB I DRIVE  
DESTIN FL 32541  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
06/16/1987  
4. FEI Number  
65-0076462  
Applied For  
Not Applicable  
5. Certificate of Status Desired [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution [ ] \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax. [ ] Yes [ ] No

2. Principal Place of Business  
21 [ ]  
Suite, Apt. #, etc.  
22 [ ]  
City & State  
23 [ ]  
Zip Country  
24 [ ] 25 [ ]  
2a. Mailing Address  
26 [ ]  
Suite, Apt. #, etc.  
27 [ ]  
City & State  
28 [ ]  
Zip Country  
29 [ ] 30 [ ]

9. Name and Address of Current Registered Agent  
MURTY, STEPHEN  
777 BRICKELL AVE  
STE 1114  
MIAMI FL 33166

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

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 Stephen Murty (NOTE: Registered Agent signature required when reinstating) DATE 2/15/99

12. OFFICERS AND DIRECTORS  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
JOHNS, KATHY  
920 BAMB I DR  
DESTIN FL  
ST  
JOHNS, DALE K.  
920 BAMB I DR  
DESTIN FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE [ ] Change [ ] Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE [ ] Change [ ] Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE [ ] Change [ ] Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE [ ] Change [ ] Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE [ ] Change [ ] Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE [ ] Change [ ] Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE: Katherine Harris (NOTE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE 2/15/99 850-843-1271 Daytime Phone #

CR2E034 (1/98)