

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # M95914 (1)

1. Corporation Name
B.C.J.P. ENTERPRISES, INC.



Principal Place of Business 26 SO 31ST AVE 25655 MARSH LANDING PARKWAY JACKSONVILLE FL 32250 US	Mailing Address 26 SO 31ST AVE 25655 MARSH LANDING PARKWAY JACKSONVILLE FL 32250 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 620 So. 3rd St.	2a. Mailing Address 26 28 So. 31st Ave
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Jacksonville Beach, FL	28 City & State Jacksonville Beach, FL
24 Zip 32250	29 Zip 32250
25 Country Dural	30 Country Dural

3. Date Incorporated or Qualified 08/23/1988	3a. Date of Last Report 06/12/1996
4. FEI Number 59-2901778	<input checked="" type="checkbox"/> 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	

9. Name and Address of Current Registered Agent UPTON, JOHN M. 25655 MARSH LANDING PARKWAY PONTE VEDRA BEACH FL 32082	
81 Name UPTON, JOHN M.	82 Street Address (P.O. Box Number is Not Acceptable) 28 South 31st Ave
83	
84 City JACKSONVILLE BEACH	85 Zip Code FL 32250

10. Name and Address of New Registered Agent	
81 Name UPTON, JOHN M.	82 Street Address (P.O. Box Number is Not Acceptable) 28 South 31st Ave
83	
84 City JACKSONVILLE BEACH	85 Zip Code FL 32250

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 *John M. Upton* **KIMI UPTON**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE
9.4.97

12. OFFICERS AND DIRECTORS	
TITLE DP	<input type="checkbox"/> DELETE
NAME UPTON, JOHN M.	
STREET ADDRESS 28 SO 31ST AVE	
CITY-ST-ZIP JACKSONVILLE BCH FL	
TITLE ST	<input type="checkbox"/> DELETE
NAME UPTON, KIMI W.	
STREET ADDRESS 28 SO 31ST AVENUE	
CITY-ST-ZIP JACKSONVILLE BCH FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME KIMI W. UPTON	
1.3 STREET ADDRESS 28 SO. 31ST AVE.	
1.4 CITY-ST-ZIP JACKSONVILLE BEACH, FL.	
2.1 TITLE Secretary/TREAS.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME John M. Upton.	
2.3 STREET ADDRESS 28. SO. 31ST AVE.	
2.4 CITY-ST-ZIP JACKSONVILLE BEACH, FL	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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: *John M. Upton* **KIMI UPTON** 9/10/97 904249 3448

CR2E034 (4/97)