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Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N95000003261 (3)

1. Corporation Name

PABLO RENEWAL IN DUVAL EAST CORPORATION



Principal Place of Business

Mailing Address

1155 BEACH BOULEVARD
JACKSONVILLE BEACH FL 32250

1155 BEACH BOULEVARD
JACKSONVILLE BEACH FL 32250-3445

3. Date Incorporated or Qualified
07/10/1995

3a. Date of Last Report
10/10/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-3332908

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 has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAKOWSKI, RAYMOND E
886 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

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 617.0502 and 617.1508, 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 617.0503, 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 DELETE
NAME JOHNSON, PEGGY R
STREET ADDRESS 3022 RED OAK DRIVE
CITY - ST - ZIP JACKSONVILLE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE VD DELETE
NAME HOLLOWAY, MARJORIE T
STREET ADDRESS 824 FIRST AVENUE SOUTH
CITY - ST - ZIP JACKSONVILLE BEACH FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE VD DELETE
NAME RIGGINS, ROSA L
STREET ADDRESS 824 FIRST AVENUE SOUTH
CITY - ST - ZIP JACKSONVILLE BEACH FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE SD DELETE
NAME CLARK, JOYCE
STREET ADDRESS 1155 BEACH BOULEVARD
CITY - ST - ZIP JACKSONVILLE BEACH FL 32250

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE TD DELETE
NAME DOUGLAS, ELIZABETH
STREET ADDRESS 830 FOURTH AVENUE SOUTH
CITY - ST - ZIP JACKSONVILLE BEACH FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE TD DELETE
NAME ODOM, KAY L
STREET ADDRESS 402 ELEVENTH STREET SOUTH
CITY - ST - ZIP JACKSONVILLE BEACH FL

6.1 TITLE Change 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Peggy R. Johnson* PEGGY R. JOHNSON

Jan. 17, 1997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0000001

CR2E037 (9/96)