## FILED May 01, 2003 8:00 am Secretary of State

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				Secretary of State 05-01-2003 90256 018 ***150.00		
DOCUMENT # P00000117 1. Entity Name  JIBS RESALES, INC.	<del></del>				718 130.00	
DO NOT WRITE		ACE				
Principal Place of Business     3110 1st Avenue N.	t Avenue N. 3110 1st Avenue N.					
Suite, Apt. #, etc. Suite 3W	, etc. Suite. Apt. #. etc. Suite 3W			DO NOT WRITE IN THIS SPACE		
City & State St. Petersburg, FL St. Petersburg, FL St. Petersburg, FL			4. FEI Number 59-3710122 Applied For Not Applicable			
Zip Country 33713			5. Certifica		\$8.75 Additional	
			<del></del>	Address of Current Registered		
DO NOT W	Name Kendal J. Bentley					
IN THIS SPACE		Street Address (P.O. Box Number is Not Acceptable)  3110 1st Avenue N., Suite 3W				
<ol> <li>The above named entity submits this statement for the obligations of registered agent.</li> </ol>	r the purpose of changing its re	egistered office or	egistered agent, or b	oth, in the State of Floride, I am fa	amiliar with, and accept	
Kulll V	Restry			4_29.	-03	
	and title if applicable (NOTE: F	kgistered Agent signatur	required when reinstating)	4-29 -		
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of	State			lection Campaign Financing rust Fund Contribution.	\$5.00 May Be Added to Fees	
10. OFFICERS AND	DIRECTORS	2 S S				
NAME STREET ADDRESS CITY-SI-ZIP  DEPT V KS-TAD T SUITE STREET ADDRESS ST. Petersburg, FL 33713	3W	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
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NAME STREET ADDRESS		NAME: STREET ADDRESS	e a sec			
CITY-ST-ZIP		CITY-ST-ZIP	<u> </u>			
12. Thereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emp attachment with an address, with all other like em	this filing does not quality for the true and accurate and that my owered to execute this report a	e exemption state signature shall hav as required by Cha	in Section 119.07(3 a the same legal effe oler 607, Florida Stat	)(i), Florida Statures. I further certi ict as if made under oath; that I a utes: and that my name appears	ify that the information m an officer or director in Block 10 or on an	

04/29/03

DAG

727-430-3550

Daytene Phone #