

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 09, 1999 8:00 am
Secretary of State
08-09-1999 90001 002 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999

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

DOCUMENT # P19497
1. Corporation Name
JLS INTERNATIONAL, INC.

Principal Place of Business
1904 NORTH MCKENZIE ST.
FOLEY AL 36535

Mailing Address
PO BOX 490
FOLEY AL 36536



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 24063 County Rd 71 N Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 928 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/03/1988	
22 City & State 23 Robertsdale AL		27 City & State 28 Robertsdale AL		4. FEI Number 63-0936833	
24 36567 25 USA		29 36567 30 USA		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 the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent HOLLINGSWORTH, STEVE 2700 DONLLEY ST. PENSACOLA FL 32526		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, JEFF 1904 NORTH MCKENZIE ST FOLEY AL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SMITH, DARLENE 1904 NORTH MCKENZIE ST FOLEY AL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____

CR2E034 (5/99)

P19497
602524-90001-2

JLS INTERNATIONAL, INC.
24063 COUNTY ROAD 71 NORTH
ROBERTSDALE, AL 36567

August 02, 1999

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Reference: **Document Number P19497 For JLS International, Inc.**

Subject: **Completed Annual Report & Payment of Fees**

Dear Sirs,

Please find attached to this letter our completed 1999 Profit Corporation Annual Report, duly signed by our registered agent and officer of the corporation. We are enclosing our check No. 33025 in the amount of \$150.00.

Please accept this amount in lieu of the additional \$400.00 late fees, due to the fact that we have no record of receiving through the mail your first notice. I telephoned your office on Monday 02 August and spoke to your representative Tom, and he advised me to send our filing and payment accompanied by this letter stating that we did not receive the original filing notice.

Please note we have recently moved to Robertsdale, AL. I have corrected our physical and mailing address on the 99 annual report. We apologize for any confusion this may have caused. If you have any questions, please advise.

Very Truly Yours,

Charles L. Reid, Jr.

Charles L. Reid, Jr.

enclosures as stated