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

PROFIT CORPORATION ANNUAL REPORT

1997

JAY JACOBS, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P34177

(6)

FILED May 02 1997 8:00am Secretary of State

							ATRIK ELIKI BURU		BRAGI ABBI
Principal Plac	e of Business	Mailing Address	Mailing Address 1530 FIFTH AVENUE SEATTLE WA 98101-1604			-{			
1530 FIFTH AV SEATTLE WA									
						3. Date Incorporated or Qualified 05/29/1991	3a. Date 05/01/		eport
	Place of Business	2a. Mailing Address	} ₁			4. FEI Number Applied For			
21		26	· · · · · · · · · · · · · · · · · · ·			91-0698077 Not Applicable			
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	;	\$8.75 A Fee Re	Additional equired
City & Stat	te	City & State	h-m '			6. Election Campaign Financing \$5.00 May Be			
23			28			Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Ζφ 29	29 30			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 Re	jistered Ag	ent	
CT CORPORATION SYSTEM					Name				
1200 S. PINE ISLAND ROAD PLANTATION FL 33324				82	Street Addr	Idress (P.O. Box Number is Not Acceptable)			
				ļ.,					
				83					
				84	City		F-1	85 Zip (Code
44 5		0000		L		····	<u> </u>	Д	
office or agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-	usuz and 607.1508, Florida Statu late of Florida, Such change was bligations of, Section 607.0505, F	леѕ, the а authori≱c lorida Sta	bove d by tutes	e-named corp the corporat s.	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of ch if the appoin	langing it Itment as	s registered registered
SIGNATURE									
40	Signature, typed or printed name of registered			d Age	nt signature requir	ed when reinstating)	DATE	IDEOTOE	10 IN 40
12.	C OFFICERS.	AND DIRECTORS DELETE	13.	TIE	T	ADDITIONS/CHANGES TO OFFIC		I Change	Addition
. NAME	JACOBS, J. JAY						h) Grange	L_J Audition
	the same and the same			AME					
STREET ADORESS	SEATTLE WA				ADDRESS				
CITY-ST-ZIP	PCEO DELETE			ITY-S	T - 71P			Change	Addition
NAME	STEFFEY, REX			22 NAME) or locally to	III Vogeron
STREET ADDRESS	1530 5TH AVE				ADDRESS				
	BELLEVUE WA								
CITY-ST-ZIP	VSD DELETE			2 4 CITY-ST-ZIP 31 TITLE			————	Change	Addition
NAME	WILLIAMS, DORIS			3 2 NAME			ι	, ondigo	Land Code((0))
STREET ADDRESS	1530 5TH AVE				ADDRESS				
	SEATTLE WA								
CITY-ST-ZIP TITLE	VCFO DELETE				ST - ZIP			Change	Addition
	LAWRENCE, WILLIAM L JR	F" DETEIC	411				t	i enange	r™l wommon
NAME	I LAWKENCE, WILLIAM L JK		4 2 1		ADDDECC				
SIRPHI MININECC	I IONII DIN MVP		■ 13 C	IULCI	ALIDOLCC I				

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.

4 4 CITY-ST-ZIP

5.9 STREET ADDRESS

63 STREET ADDRESS

5 4 CITY-ST-ZIP

51 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELETE

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

TITLE

NAME

SEATTLE WA

4/22/92

Change

Change

Addition

Addition