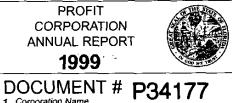
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90192 036 ***150.00

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JAY JAC	OBS, INC.										
Principal Plac	e of Business	Mailing Addr	ess				- 	BI DIELI VIDII)(0 () 1 38() (10)	
530 FIFTH AVENUE 1530 FIFTH AVENUE											
SEATTLE WA 98101 SEATTLE WA 98101							DO NOT WRITE IN THIS SPACE				
								N THIS SI	ACE		7
							3. Date Incorporated or Qualifed				ì
2 Debusional D	lace of Business	2= Mailing A	ddraee				05/29/1991 4. FEI Number		Δr	pplied For	1
z. Principai P 	lace or business	2a. Mailing Address					91-0698077			t Applicable	1
Suite, Apt.	# etc	Suite, Apt. #, etc.					_		\$8.75		1
Julie, Apr.	π, e.c.	27					5. Certifcate of Status Desired	3	Fee Re		}
City & Stat			City & State				6. Election Campaign Financing		\$5.00	May Be	1
3		28					Trust Fund Contribution	1	Added t	•	_}
Zìp	Country	Zip		Coun	itry		8. This corporation owes the current	year Intan	gible		
4	25	29	3	0			Personal Property Tax.		Yes	□No	
	9. Name and Address of Curren	t Registered Age	nt		_		10. Name and Address of New Regi	stered Ag	ent		4
OT /	CODDODATION OVETEN				81	Name					1
	CORPORATION SYSTEM			<u> </u>	82	Street Addre	ess (P.O. Box Number is Not Acceptable)				7
	S. PINE ISLAND ROAD				_						4
PLA	NTATION FL 33324			[83						
				<u> </u>	84	City			85 Zip (Code	1
								FL		1.12.1	4
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such c	hange was autl	horized	by t	-named corpo the corporation	oration submits this statement for the pur n's board of directors. I hereby accept the	pose of cn e appointr	anging its nent as re	gistered	
SIGNATURE								DATE			
	Signature, typed or printed name of registered ager		(NOTE. R	egistered A	\gent	signature required	ADDITIONS/CHANGES TO OFFICE		DIRECTO	PS IN 12	∤ §
IIILE	VP OFFICERS AIN	OFFICERS AND DIRECTORS DELETE			E		ADDITIONS/CHANGES TO OFFICE		Change	☐ Addition	13
NAME	FRIESEN, REBECCA			1.1 TITLE I 1.2 NAME					_		1;
STREET ADORESS	1530 5TH AVE		1.3 STREET ADDRESS							8	
	SEATTLE WA 98101	J			I.4 CITY-ST-ZIP						13
CITY-ST-ZIP TITLE	PCEO DELETE			2.1 TITL	_	-211			Change	☐ Addition	7
NAME	STEFFEY, REX			2.2 NAME							
STREET ADDRESS	1530 5TH AVE					ADDRESS					
CITY-ST-ZIP	BELLEVUE WA			2. 4 CIT		ļ					1
TITLE	/CFO DELETE		3.1 TITLE		-		[Change	☐ Addition	1	
NAME	LAWRENCE, WILLIAM L JR			3.2 NAN	νE						
STREET ADDRESS	1530 5TH AVE			3 3 STR	REET	ADDRESS					ļ
CITY-ST-ZIP	SEATTLE WA			3.4. CITY-ST-ZIP							
TITLE	☐ DELETE			4.1 TITLE				Change	Addition	1	
NAME				4. 2 NA	ME	}					
STREET ADDRESS				4.3 STR	REET	ADDRESS					
CITY-ST-ZIP	}			44 C/T	Y-ST	-ZIP					
TITLE			DELETE	5.1 TITL	E			[Change	☐ Addition	
VAME				5.2 NAM	ИE						
STREET ADDRESS				5.3 STR	REET	ADDRESS					
CITY-ST-ZIP				5.4 CIT	Y-\$T	-ZIP					
TITLE			DELETE	6.1 TITL	Ε			1	Change	Addition	d –

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 any address, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME 63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

206-622-5400