

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

APPROVED AND FILED

96 JAN 23 AM 10: 08

DOCUMENT # P93000029794 (3)

1. Corporation Name
GJH CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: 20893 DEL LUNA DR. BOCA RATON FL 33433
Mailing Address: 20893 DEL LUNA DR. BOCA RATON FL 33433

3. Date Incorporated or Qualified: 04/22/1993
3a. Date of Last Report: 01/18/1995

2. Principal Place of Business 2a. Mailing Address

21. State, 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: 65-0412454
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 [checked] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HANDMAN, JEROME L
20893 DEL LUNA DR.
BOCA RATON FL 33433

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 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, 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 understand, the provisions of Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 PS HANDMAN, JEROME L 20893 DEL LUNA DR BOCA RATON FL 33433
12.2 VT HANDMAN, GLORIA B 28093 DEL LUNA DR BOCA RATON FL 33433

13.1 400001707414
13.2 -02/06/96--01051--016
13.3 ****200.00 ****200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ DATE: 1/17/96 DAYTIME PHONE: 407/479-3095

CR2E034 (12/95)