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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000033169 (2)

J. & N. PI ASTERING, INC.

FILED May 07 1997 8:00am Secretary of State

Principal Place of Business	Mailing Address		1 188(1895 st.0 things solls april 40414 abits	i mārmā licās kicās siesa dir	IN INTERPRET
9826 SANDY RUN 9826 SANDY RUN JUPITER FL 33458 JUPITER FL 33478-8331					
			3. Date incorporated or Qualified 05/05/1993	3a. Date of Last F 04/24/1996	Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number		pplied For
1	26		65-0412717		ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additionat equired
City & State	City & State	·	6. Election Campaign Financing		May Be
3	28	1	Trust Fund Contribution		to Fees
Ζιρ Country 25	Z _{IP}	Gountry 30	8. This corporation has liability for in Florida Statutes	intangible tax under a ∐Yes	s. 199.032,
9, Name and Address of Currer		1301	10. Name and Address of New Re	<u> </u>	
VICKERS, JOHN		81 Name			
9826 SANDY RUN		82 Street Add	dress (P.O. Box Number is Not Acceptab	nie)	
JUPITER FL 33458				····	
		83			
		84 City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.050	02 and 607 1508 Florida Statu	ites the shove-named co	coration submits this statement for the n	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	ts registered
Signature, typed or printed name of registered ag	ent and titre if applicable. (NO	TE: Registered Agent signature req	uired when reinstating)	DATE	·····
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4. I do hereby certify that the information supplied with this filling 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 are 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/97 561-747-0042 Date Device Phone #