SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000034917 (3)

MICHAEL JACK INC

FILED Jul 29 1997 8:00am Secretary of State

MICHAE	EL JACK, INC.	` '				
				<u> </u>	A	
	e of Business	Mailing Address				
373 EAGLE DR. P.O. BOX 4100 JUPITER FL 33477 RYDAL PA 19046						
		III DAE IN 19070		DO NOT WRITE	IN THIS SPACE	
	1			3. Date Incorporated or Qualified	3a. Date of Last Report	
				05/14/1993	05/01/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		22-2288997	Not Applicable	
Suite, Apt.		Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has pa		
24	25 9, Name and Address of Curr		30	Personal Property Tax due June 10. Name and Address of New Re		
	APIRO, PAUL E		81 Name	ID, Manio and Addices of New Me	gistorou Agent	
% Greenberg traurig hoffman lipoff rosen 777 S. Flagler Dr., Suite 310-e			82 Street Addr	Street Address (P.O. Box Number is Not Acceptable)		
	ST PALM BEACH FL 33401	•	83			
	:		84 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statuto	s, the above-named corp	oration submits this statement for the pion's board of directors. I hereby acce		
agent. I a	im familiar with, and accept the obli	igations of, Section 607.0505, Flor	rida Statutes.	orra board or directors. Thereby accep	or the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered a	THOUSE THE TAXABLE PROPERTY.				
12.		ND DIRECTORS	. Registered Agent signature require	ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE	7.12-1.10-10-10-10-10-10-10-10-10-10-10-10-10-1	Change Addition	
NAME	SCHMIDT, MICHAEL J		1.2 NAME	•		
STREET ADDRESS	373 EAGLE DR.		1.3 STREET ADDRESS			
CITY-ST-ZIP	JUPITER FL 33477		1.4 CITY-ST-ZIP			
TITLE	D	DELETE	2.1 TIBLE		Change Addition	
NAME	ROSENBERG, ARTHUR		2.2 NAME			
STREET ADDRESS	P.O. 4100 N/A		2.3 STREET ADDRESS			
CITY-ST-ZIP	RYDAL PA	Locusto	2 4 CITY+ST-ZIP			
TITLE	4	☐ DELETE	3 1 TITLE		Change Addition	
NAME OTOCCY ADDRESS	*		32 NAME			
STREET ADDRESS			3.3 STREET AUDRESS			
CITY-ST-ZIP TITLE	' 	☐ DELFTE	3 4. CITY-ST-ZIP 41 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CHY-ST-ZIP			
TITLE	**************************************	DELETÉ	5 1 TITLE		Change Addition	
NAME	i.		5.2 NAME			
STREET ADDRESS	!	•	5.3 STREET ADDRESS		•	
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-S1-ZIP			

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 master 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 effection with an address.

CIONATURE.

7/24/97