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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	C JUPITER, INC.	JU8U342 (<i>1</i>)			
Principal Plac	e of Business	Mailing Address			I MOTOL TRIFF BOTON STEEL BANKE STOLL CODE
3300 PGA BI	.VD	3300 PGA BLVD			
620		620		DO MOT WIDITE	14.T. NO 504.05
PALM BCH GDN\$ FL 33410		PALM BCH GDNS FL 33410-B11 US		DO NOT WRITE IN THIS SPACE	
00		03		3. Date Incorporated or Qualified 11/18/1993	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0455391	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CO 7E
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e T	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid Personal Property Tax due June 3	the current year Intangible
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
COWIE, PETER V 81 Name					
3300 PGA BLVD.		82 Street Add	Idress (P.O. Box Number is Not Acceptable)		
STE 620		or Street Add	ress (r.o. box Number is Not Acceptable	')	
PALM B CH GDNS FL 33410-2811			83		
		84 City		85 Zip Code	
					FL `
	to the provisions of Sections 607.05.02 logistered agent, or both, in the State of irm familiar with, and accept the obligat	rand 607.1508, Florida Statuti of Florida. Such change was a lions of, Section 607.0505, Flo	es, the above-named corp authorized by the corporat prida Statutes.	poration submits this statement for the pur tion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typied or printed name of registered agent	and title it applicable (NOT)	L. Registered Agent signature requi	red when reinslating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	DELFTE	1.1 TITLE		Change Addition
NAME	COWIE, PETER V		1.2 NAME		
STREET ADORESS	\$300 PGA BLVD SUITE 620		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PALM BCH GARDENS FL VSTD	☐ DELETE	1.4 CITY - ST - ZIP		Change Addition
NAME	MCINSTOSH, ROBERT A	LJ WILL IL	2.1 TITLE 22 NAME		L Change Addition
STREET ADDRESS	\$300 PGA BLVD SUITE 620		2 3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS FL		2. 4 City-St-ZiP		
THTLE		DELETE	31 TITLE		Change Addition
NAME	•		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP		
TITLE		☐ DCLETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP		Chance Little
ì		FT DECEIE	5.1 TITLE		☐ Change ☐ Addition
NAME Street address	•		5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME	**	—	6.2 NAME		
STREET ADDRESS	Š		6.3 STREET ADDRESS		
	ř				

14. I 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to except 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.

1/7/98 561–775–7393