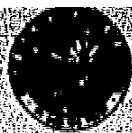


**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # P93000085586 (4)

95 MAR 31 AM 11:32

1. Corporation Name

JEC ASSOCIATES, INC.

Principal Place of Business

**1146 LAGUNA SPRINGS DR.
FT. LAUDERDALE FL 33394**

Mailing Address

**1146 LAGUNA SPRINGS DR.
FT. LAUDERDALE FL 33394**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/10/1993

3a. Date of Last Report

04/26/1994

4. FEI Number

65-0468219

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 ☐ No

2. Principal Place of Business

21 6060 SW 18th St

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Boca Raton FL

28 City & State

29 City & State

24 Zip

33

25 Country

PAH Beach

29 Zip

30

30 Country

9. Name and Address of Current Registered Agent

**NEWMAN, WILLIAM D JR
ONE FINANCIAL PLAZA
SUITE 2626
FT. LAUDERDALE FL 33394**

10. Name and Address of New Registered Agent

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, or both, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and date of application)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CIANFRINI, JEROME
STREET ADDRESS 1148 LAGUNA SPRINGS DR.
CITY, ST, ZIP FT. LAUDERDALE FL 33326

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

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CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

P. D.

Cianfrini, Jerome

1146 Laguna Springs Dr

21 Laud FL 33326

☒ Change ☒ Addition

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

V.P. Secretary

Cianfrini, Cheryl

1146 Laguna Springs Dr

21 Laud FL 33326

☐ Change ☒ Addition

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

☐ Change ☐ Addition

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

☐ Change ☐ Addition

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

☐ Change ☐ Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

JEROME CIANFRINI

3/28/95

305389033

Signature Number

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is accurate and that my signature shall have the same legal effect as if made under oath. But I am not an officer or director of the corporation or the receiver or trustee empowered to file 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.