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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000011716 (5)

JEBRY PROPERTIES, INC.

Principal Place of Business

205 W BUSCH BLVD TAMPA FL 33612			SU	205 W BUSCH BLVD SUITE 200 TAMPA FL 33612-7945 US								
									3. Date Incorporated or Qualified 02/11/1994	d 3a. Date of Last Report 02/16/1996		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			plied For
21			26	Suite, Apt. #, etc.					59-3223615	t Applicable		
Surte, Apt. #, etc.				27 Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State				City & State					Election Campaign Financing Trust Fund Contribution Added to			• •
Zip 24	Country Z _{IP} 25 29 30						intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name a	ind Address of Cu	rrent Regis	tered A	jent			,	10. Name and Address of New Re	gistered /	\gent	
		ENCE E ESQ.					81	Name				
% FUENTES AND KREISCHER 1407 W. BUSCH BLVD. TAMPA FL 33612							82	Street A	ddress (P.O. Box Number is Not Acceptable)			
							83					
							84	City		FL	85 Zip	Code
office or r	registered age im familiar with	int, or both, in the S	tate of Flori bligations o	ida Such f. Section	change was 1 607.0505, F	authorize Iorida Sta	d by tutes	the corpost.	corporation submits this statement for the poration's board of directors. I hereby acce	pt the app	ointment as	registered
12.			DIRECTORS I 13.					ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12	
TITLE	D				DELETE	1.1 1	TLE				Change	Addition
NAME	CLARKE, F	ROBERT				1.2 N	AME	i				
STREET ADDRESS	205 W BUS	SCH BLVD				1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	TAMPA FL	33612				1.4 0	ITY-S	ST- ZIP				
TITLE	D				DELETE	2.1 T	TLE				☐ Change	Addition
NAME	CLARKE, E					2.2 N	AME	ĺ				
STREET ADORESS	205 W BU					2.3 S	TREET	ADDRESS				
CITY-ST-7IP	TAMPA FL	33612			l nevere			ST-ZIP			T Otania	1.000
TITLE					DELETE	317		[Change	Addition
NAME						3.2 N						
STREET ADDRESS								AODRESS				İ
CITY-ST-ZIP TITLE					DELETE	3.4. t		ST-ZIP			Change	Addition
NAME							VAME	1				
STREET ADDRESS								ADDRESS				
CITY-ST-ZIP								ST - ZIP				
TITLE					DELETE	5.17					Change	Addition
NAME						5.2 N	AME					
STREET ADDRESS								T ADDRESS				
CiTY - ST - ZiP						5.4 0	<u> </u>	ST-ZIP				
TITLE					DELETE	6.1 T	ITLE				Change	Addition
NAME						6.2 N	AMÉ					
STREET ADDRESS						6.3 S	TREE	ADDRESS				
CITY OF TID	1					640	ITV_6	ן מור_די				

14. Ido heroby 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 cath; 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