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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000024982 (8)

JACNEU, INC.

Principal Place of Business

Mailing Address

10944 C MILITARY TRI 740

## **FILED** Apr 14 1997 8:00am Secretary of State



DELRAY BEAC		DELRAY BEACH FL 33484-65	05						
				3. Date Incorporated or Qualified 03/28/1994	3a. Date of Last Report 04/15/1996				
	lace of Business	2a. Mailing Address		~ · ·	4. FEI Number			oplied For	
21 4800		26 4800 W. Lin	ton	Blud	65-0584703		No	ot Applicable	
Suite, Apt.		Suite, Apt. #, etc. <b>F107</b>			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional adulted	
City & State		City & State			6. Election Campaign Financing		\$5.00	··	
23 De/10	zu Beach 41.	28 De Vay Bea	ch '	H. –	Trust Fund Contribution		Added 1		
Zip 24 3344		<sup>2</sup> φ 29 <b>33</b> 445 3	Countr		8. This corporation has liability for in Florida Statutes	Yes 🗍	No	. 199.032,	
	9. Name and Address of Current	Registered Agent		J	10. Name and Address of New Reg	istered Ag	ent		
	ENDER, JOEL R		81	Name					
507 SE 11TH CT				82 Street Address (P.O. Box Number is Not Acceptable)					
FT l	LAUDERDALE FL 33316								
			83	<u>'</u>	·				
			84	City		FL	85 Zip (	Code	
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									
12.	Signature, typed or printed name of registered agent OFFICERS AND		legistered Ag ■13.	ent signature rec	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DO ANIO DIE	SECTORS	STREET OF LATE	
TITLE	DP OFFICERS AND	DELETE	1.1 TITLE	T	7,001101070171102010011102		Change	Addition	
NAME	NEUMAN, DAVID	E 2000 10	1.2 NAME			<b>.</b>	) Ondrigo		
STREET ADDRESS	18244 S MILITARY TRL 710			T ADDRESS					
CITY-ST-ZIP	DELRAY BEACH FL 33484		1.4 CITY-					1	
TITLE	DVST	DELETE	2.1 1(TLE	51.71			Change	Addition	
NAME	IJAC, DAVID		2.2 NAME			•	,		
STREET ADDRESS	16244 S MILITARY TRL 710		ŀ	T ADDRESS				ĺ	
CITY-ST-ZIP	DELRAY BEACH FL 33484		2 4 Cily-					l	
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NAME			4 2 NAME						
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ŤITLE		☐ DECETE	5.1 TITLE			L	Change	Addition	
. NAME			5.2 NAME						
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CITY-ST-ZIP			5.4 CITY-1	ST-ZIP					
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NAME			6.2 NAMÉ	)				ĺ	
STREET ADDRESS			6.3 STREE	1 ADDRESS					
CITY-ST-ZIP			6.4 CITY - 5						
14. Ldo hereh	by certify that the information subulied	Willy this filled done not qualify	or the eve	amuslion etate	ed in Section 110 07/3\(i\) Florida Statutos	Lituribor oc	wife that	tho	

Information indicated on the annual report of suppliemental 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or organ attachment with an address.

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