

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

FILED

Jun 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000028744 (8)

1. Corporation Name  
STOP HERE, INC.



Principal Place of Business  
12187 BEACH BLVD., SUITE 1  
JACKSONVILLE FL 32246  
US

Mailing Address  
12187 BEACH BLVD., SUITE 1  
JACKSONVILLE FL 32246-0620  
US

3. Date Incorporated or Qualified 04/14/1994	3a. Date of Last Report 04/30/1996
4. FEI Number 59-3241878	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

BARLOW, A. WELLINGTON ESQ.  
24 N. MARKET ST.  
SUITE 502  
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D KADER, CHOWDHURY F	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	12187 BEACH BLVD SUITE 1	1.2 NAME	
STREET ADDRESS	JACKSONVILLE FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD CHOWDHURY, FRANCES W	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	12187 BEACH BLVD., STE 10	2.2 NAME	
STREET ADDRESS	JACKSONVILLE FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D DDOWLA, MOHAMMED S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	12187 BEACH BLVD STE 10	3.2 NAME	
STREET ADDRESS	JACKSONVILLE FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	500002209245
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-06/11/97--01103--031
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	***165.00
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 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 on an attachment with an address.

SIGNATURE:

STOP HERE, INC.

4. 29. 97

642-0999

6/4/97

CR2E034 (9/96)