


FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED  
Mar 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Monham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P94000036770 (3) 1. Corporation Name JCD ENTERPRISES, INC.		

Principal Place of Business 35 E PINEHURST BLVD EUSTIS FL 32726	Mailing Address 35 E PINEHURST BLVD EUSTIS FL 32726
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 PO Box 718 27 Suite, Apt. #, etc. 28 EUSTIS, FL 29 Zip 30 32727
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9. Name and Address of Current Registered Agent BLANCHARD, CLAYTON H JR 35 E PINEHURST BLVD EUSTIS FL 32726	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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)

12. OFFICERS AND DIRECTORS	
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
D BLANCHARD, CLAYTON H JR 35 E PINEHURST BLVD EUSTIS FL 32726	<input type="checkbox"/> DELETE
D BELTON, ROBERT 37221 SANDY LANE GRAND ISLAND FL	<input type="checkbox"/> DELETE
D BLANCHARD, AMY B 28432 TAMMI DR TAVARES FL	<input type="checkbox"/> DELETE
D BELTON, DOBBIE B. 37221 SANDY LANE GRAND ISLAND, FL 32735	<input type="checkbox"/> DELETE
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
	<input type="checkbox"/> DELETE
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
	<input type="checkbox"/> DELETE

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 05/16/1994	4. FEI Number 59-3242519
5. Certificate of Status Desired <input type="checkbox"/>	Applied For Not Applicable
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$8.75 Additional Fee Required
7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	\$5.00 May Be Added to Fees

10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85 Zip Code	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.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I 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 or both, or as an attachment with an affidavit.

SIGNATURE:  2/24/98 352 589 1919

CR2E034 (10/97)